Name of Candidate or Committee _____

Reporting period _____ **through** _____

ITEMIZED RECEIPTS

A. Source: ◯ **Corporation** ◯ **PAC** ◯ **Individual** ◯ **Loan** ◯ **Other (please specify)**_____	**Date (Mo., Day, Year)**	**Amount of each receipt this period**
Full name	___ / ___ / ___	**$**
Mailing Address	___ / ___ / ___	**$**
City, State, Zip Code	___ / ___ / ___	**$**
Name of Employer (Required)	___ / ___ / ___	**$**
Occupation (Required)	**Aggregate year–to-date**	**$**

B. Source: ◯ **Corporation** ◯ **PAC** ◯ **Individual** ◯ **Loan** ◯ **Other (please specify)**_____	**Date (Mo., Day, Year)**	**Amount of each receipt this period**
Full name	___ / ___ / ___	**$**
Mailing Address	___ / ___ / ___	**$**
City, State, Zip Code	___ / ___ / ___	**$**
Name of Employer (Required)	___ / ___ / ___	**$**
Occupation (Required)	**Aggregate year–to-date**	**$**

C. Source: ◯ **Corporation** ◯ **PAC** ◯ **Individual** ◯ **Loan** ◯ **Other (please specify)**_____	**Date (Mo., Day, Year)**	**Amount of each receipt this period**
Full name	___ / ___ / ___	**$**
Mailing Address	___ / ___ / ___	**$**
City, State, Zip Code	___ / ___ / ___	**$**
Name of Employer (Required)	___ / ___ / ___	**$**
Occupation (Required)	**Aggregate year–to-date**	**$**

D. Source: ◯ **Corporation** ◯ **PAC** ◯ **Individual** ◯ **Loan** ◯ **Other (please specify)**_____	**Date (Mo., Day, Year)**	**Amount of each receipt this period**
Full name	___ / ___ / ___	**$**
Mailing Address	___ / ___ / ___	**$**
City, State, Zip Code	___ / ___ / ___	**$**
Name of Employer (Required)	___ / ___ / ___	**$**
Occupation (Required)	**Aggregate year–to-date**	**$**