

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	\$