

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full						
To Whom Paid			M	D	Y	Amount
Address		Purpose				
City	State	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address		Purpose				
City	State	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address		Purpose				
City	State	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address		Purpose				
City	State	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address		Purpose				
City	State	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address		Purpose				
City	State	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address		Purpose				
City	State	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address		Purpose				
City	State	Zip Code	Check Number			