

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>The Committee for Chris Long</b>												
To Whom Paid <b>American Express</b>						M	D	Y	Amount			
						0	1	0	4	1	1	7.95
Address <b>PO Box 981540</b>				Purpose <b>Fee to accept electronic donations via website</b>								
City <b>El Paso</b>				State <b>T X</b>		Zip Code <b>79998</b>		Check Number <b>EFT/ACH</b>				
To Whom Paid <b>From Form 31-N</b>						M	D	Y	Amount			
						0	1	1	8	1	1	90.80
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			