ITEMIZED STATEMENT OF EXPENDITURES - PAC

1. NAME OF COMMITTEE 2.				2. REPORT COVE	ERING THE PERIOD
				FROM:	TO:
					Amount
3. TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					a noried) If the ov
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period). If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g. postage, printing) along with the candidate's name in the purpose of expenditure section.					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			<u> </u>		
			<u> </u>		Data of Evnanditura
Address					Date of Expenditure
City	State	Zip Code	+		
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					Data of Everanditions
Address					Date of Expenditure
City	State	Zip Code			
First Name	Middle Nar	I me	Purpose of Expenditure		Amount of Expenditure
					·
Last Name/Business Name					
Address			1		Date of Expenditure
City State Zip Code			4		
City	State	Zip Code			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Leat Name (Durings Name					
Last Name/Business Name					
Address					Date of Expenditure
City State Zip Code		_			
	State	2.0000			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			4		
Address					Date of Expenditure
City	State	Zip Code	+		
First Name	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure
I BOLINGING	rivaire Milde Name		a pose of Experimiture		amount of Experialities
Last Name/Business Name			7		
Address			1		Date of Expenditure
Ch. Tr. a. I			1		
City	State	Zip Code			
5. TOTAL ITEMIZED EXPENDITURES					
(Carry forward to item 3. of next page if additional pages of this form are used.)					
(If this is the last page of campaign expenditures, this amount must be shown in item 17b. of summary.)					

- S

SS-1119-E (Rev. 1/00) Page _____ of ____ RDA 1159