## COMMITTEE SCHEDULE B—ALL OTHER FUNDS

		Amended:
Full Legal Name of Candidate (if applicable)	Full Name of Committee	
Type of Report	Reporting Period:	Number (if assigned)

Date	Type of Other Funds	Description of Other Funds	Amount	Reporting Period Total	Aggregate Total

## Committee Schedule B—All Other Funds Continued

		Amended: $\square$
Full Legal Name of Candidate (if applicable)	Full Name of Committee	
Type of Report	Reporting Period:	Number (if assigned)

Date	Type of Other Funds	Description of Other Funds	Amount	Reporting Period Total	Aggregate Total