COMMITTEE SCHEDULE F—OFFICEHOLDER EXPENSES

Amended:

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

Officeholder Expenses	Number	Reporting Period Total	Aggregate Total	
of \$200 or less				

OFFICEHOLDER EXPENSES EXCEEDING \$200

Date	Name and Address of Entity to Whom Expenditure was Made	Description of the Goods or Services Purchased	Amount	Reporting Period Total	Aggregate Total

Committee Schedule F—Officeholder Expenditures Continued

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

Date	Name and Address of Entity to Whom Expenditure was Made	Description of the Good or Services Purchased	Amount	Reporting Period Total	Aggregate Total