COMMITTEE SCHEDULE D—IN KIND CONTRIBUTIONS

					Amended:	
Full Legal Name of Candidate (if applicable)		Full Name of Committee				
Type of Report Report		orting Period:			Number (if assigned)	
T. IZ. 1 C. A. T. A.	Numl	or	Paparting Pariod Total	Aggree	roto Total	

In Kind Contributions of \$50 or less Reporting Period Total Aggregate Total

IN KIND CONTRIBUTIONS EXCEEDING \$50

Contribute Liferantian							
Date	Contributor Information [Name/Address/Occupation/Employer] [Name of Committee, Committee #]	Type of Contributor	Description of Goods or Services	Amount	Reporting Period Total	Aggregate Total	
·	[:						

Committee Schedule D—In Kind Contributions Continued

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

Date	Contributor Information [Name/Address/Occupation/Employer] [Name of Committee, Committee #]	Type of Contributor	Description of Goods or Services	Amount	Reporting Period Total	Aggregate Total