

FEC FORM 11

24-HOUR NOTICE OF OPPOSITION PERSONAL FUNDS AMOUNT (11 CFR 400.30) (Millionaires' Amendment)

1. Name of Candidate	2. Candidate ID Number <input type="text"/>	
3. Office Sought	4. State	5. District
6. Name of Principal Campaign Committee	7. Committee ID Number <input type="text" value="C"/>	
8. Address	9. City, State and Zip Code	

The information below is based on the worksheet calculations and receipt of a 24-hour Notice of Expenditure of Personal Funds (FEC Form 10) from the following committee/candidate:

10. Name of Candidate	
11. Name of Committee	12. Committee ID Number <input type="text" value="C"/>
13. Committee Address	
14. City, State and Zip Code	15. Date of Receipt of FEC Form 10: <input type="text" value="M M / D D / Y Y Y Y"/>

16. Opposition Personal Funds Amount (11 CFR 400.10 See worksheet in instructions) <input type="text"/> (From Part A, Line # 3 or 9 of worksheet)	17. Election <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other _____	18. Type <input type="checkbox"/> Regular <input type="checkbox"/> Special
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I certify that I have examined this notice and to the best of my knowledge and belief, it is true, correct and complete.

PRINT OR TYPE NAME

SIGNATURE OF CANDIDATE OR TREASURER OF PRINCIPAL CAMPAIGN COMMITTEE

DATE