Form **8872** (November 2002)

Political Organization Report of Contributions and Expenditures

OMB No. 1545-1696

Department of the Treasury Internal Revenue Service

► See Seperate instructions.

_A	For t	the period beginning			,20	and end	ling		, 20	
<u>B</u>		ck applicable boxes:	Intial report		Change of address		Amended			report
1	Nam	ne of organization						Employer i	dentification	on number
2	Mailing address (P.O. Box or number, street, and room or suite number)									
	City	or town, state, and ZIP co	ode							
3	E-ma	ail address of organization						4 Date org	janization v	was formed
5a	Nam	ne of custodian of records		5b	Custodian's address			•		
	Nlama			/ h	Cantast names n/a add					
bа	ivam	ne of contact person		6b	Contact person's add	ress				
7	Busi	ness address of organizati	on (if different from i	mailing a	ddress shown above).	Number, :	street, and r	oom or suite	number	
	City	or town, state, and ZIP co	ode							
8	Туре	e of report (check only one	box)							
а		First quarterly report (due	by April 15)		f Monthly report (due by the 2 December re	20th day	following th	e month sho	wn above,	except the
b		Second quarterly report (d	lue by July 15)		g Pre-election re	port (<i>due</i>	by the 12th	or 15th day l	before the	election)
					(1) Type of ele					
С	Ш.	Third quarterly report (due	by October 15)		(2) Date of ele					
a	\Box	Voor and roport (due by l	anuary 21)		(3) For the sta	ite of:				
d	ш	Year-end report (due by Ja	anuary 31)		h Post-general e	lection re	nort (due hi	the 30th day	after gene	ural election
е	П	Mid-year report (Non-elect	tion		(1) Date of ele		port (due b)	The John day	and gene	rai cicciionij
_		year only-due by July 31)			(2) For the sta					
					• •					
9	Tota	I amount of reported contr	ibutions (total from a	all attach	ed Schedules A)			9		
10	Tota	I amount of reported expe	nditures (total from a	all attach	ed Schedules B).			10		
		Under penalties of perjury, I	•		•	nvina sche	dules and stat	<u>'</u>	the hest of r	ny knowledae
Sin	ın İ	and belief, it is true, correct,			. sport, moldaring accompa	,	aaloo aha otat	oonto, and to	5031 01 1	, movieuge
Sig He										
пе	i e	\					_			
		Signature of authorize	zed official				Date	е		

Itemized Contributions Jame of organization	Schedule A page of Employer identification numb	
value of organization		
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date • \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ► \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ► \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date > \$	Date of contribution
contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
ontributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date > \$	Date of contribution

Schedule B Itemized Expenditures	Schedule B page of	
Name of organization		Employer identification number
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
		\$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	S Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	S Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	S Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
Purpose of expenditure		
Subtotal of expenditures reported on this page onl line 10 of Form 8872	ly. Enter here and also include this amount in the to	otal on . ▶ \$

