

**Political Organization  
Report of Contributions and Expenditures**

OMB No. 1545-1696

► See Separate instructions.

**A** For the period beginning \_\_\_\_\_, 20\_\_\_\_ and ending \_\_\_\_\_, 20\_\_\_\_

**B** Check applicable boxes: ☐ Initial report ☐ Change of address ☐ Amended report ☐ Final report

**1** Name of organization \_\_\_\_\_ **Employer identification number** \_\_\_\_\_

**2** Mailing address (P.O. Box or number, street, and room or suite number) \_\_\_\_\_

City or town, state, and ZIP code \_\_\_\_\_

**3** E-mail address of organization \_\_\_\_\_ **4** Date organization was formed \_\_\_\_\_

**5a** Name of custodian of records \_\_\_\_\_ **5b** Custodian's address \_\_\_\_\_

**6a** Name of contact person \_\_\_\_\_ **6b** Contact person's address \_\_\_\_\_

**7** Business address of organization (if different from mailing address shown above). Number, street, and room or suite number \_\_\_\_\_

City or town, state, and ZIP code \_\_\_\_\_

**8** Type of report (check only one box)

**a** ☐ First quarterly report (*due by April 15*)

**b** ☐ Second quarterly report (*due by July 15*)

**c** ☐ Third quarterly report (*due by October 15*)

**d** ☐ Year-end report (*due by January 31*)

**e** ☐ Mid-year report (*Non-election year only-due by July 31*)

**f** ☐ Monthly report for the month of: \_\_\_\_\_  
(*due by the 20th day following the month shown above, except the December report, which is due by January 31*)

**g** ☐ Pre-election report (*due by the 12th or 15th day before the election*)  
**(1)** Type of election: \_\_\_\_\_  
**(2)** Date of election: \_\_\_\_\_  
**(3)** For the state of: \_\_\_\_\_

**h** ☐ Post-general election report (*due by the 30th day after general election*)  
**(1)** Date of election: \_\_\_\_\_  
**(2)** For the state of: \_\_\_\_\_

**9** Total amount of reported contributions (total from all attached **Schedules A**). . . . . **9** \_\_\_\_\_

**10** Total amount of reported expenditures (total from all attached **Schedules B**). . . . . **10** \_\_\_\_\_

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

► Signature of authorized official \_\_\_\_\_ Date \_\_\_\_\_

<b>Schedule A Itemized Contributions</b>		Schedule A page      of
Name of organization		<b>Employer identification number</b>
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
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
<b>Subtotal</b> of contributions reported on this page only. Enter here and also include this amount in the total on line 9 of Form 8872 . . . . . ►		\$

<b>Schedule B</b> <b>Itemized Expenditures</b>		Schedule B page      of
Name of organization		<b>Employer identification number</b>

  

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
		<b>\$</b>
	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
		<b>\$</b>
	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
		<b>\$</b>
	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
		<b>\$</b>
	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
		<b>\$</b>
	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
		<b>\$</b>
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

  

<b>Subtotal</b> of expenditures reported on this page only. Enter here and also include this amount in the total on line 10 of Form 8872 . . . . .		<b>\$</b>
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