

SCHEDULE F (FEC Form 3X)**ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**

PAGE OF

FOR LINE 25 OF FORM 3X

(To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full)									
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, name the designating committee:				Full Name of Subordinate Committee					
				Mailing Address					
				City		State		ZIP Code	
Full Name (Last, First, Middle Initial) of Each Payee				<input type="checkbox"/> Memo Item		Purpose of Expenditure		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/ Type	
Mailing Address						Date			
City		State		Zip Code		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> / <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> / <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>			
Name of Federal Candidate Supported		Office Sought:		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: _____ District: _____		Amount	
Aggregate General Election Expenditure for this Candidate ▶				<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>					
Full Name (Last, First, Middle Initial) of Each Payee				<input type="checkbox"/> Memo Item		Purpose of Expenditure		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/ Type	
Mailing Address						Date			
City		State		Zip Code		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> / <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> / <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>			
Name of Federal Candidate Supported		Office Sought:		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: _____ District: _____		Amount	
Aggregate General Election Expenditure for this Candidate ▶				<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>					
Full Name (Last, First, Middle Initial) of Each Payee				<input type="checkbox"/> Memo Item		Purpose of Expenditure		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/ Type	
Mailing Address						Date			
City		State		Zip Code		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> / <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> / <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>			
Name of Federal Candidate Supported		Office Sought:		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: _____ District: _____		Amount	
Aggregate General Election Expenditure for this Candidate ▶				<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>					
Full Name (Last, First, Middle Initial) of Each Payee				<input type="checkbox"/> Memo Item		Purpose of Expenditure		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/ Type	
Mailing Address						Date			
City		State		Zip Code		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> / <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> / <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>			
Name of Federal Candidate Supported		Office Sought:		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: _____ District: _____		Amount	
Aggregate General Election Expenditure for this Candidate ▶				<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>					
SUBTOTAL of Expenditures This Page (optional)..... ▶						<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>	
TOTAL This Period (last page this line number only)..... ▶						<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>	