

**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>Category/ Type</div>	
Mailing Address						Date		<div>M M / D D / Y Y Y Y Y Y</div>	
City		State		Zip Code		Amount		<div></div>	
Name of Federal Candidate Supported		Office Sought:		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: _____ District: _____			
Aggregate General Election Expenditure for this Candidate ▶				<div></div>					
Full Name (Last, First, Middle Initial) of Each Payee				<input type="checkbox"/> Memo Item		Purpose of Expenditure		<div>Category/ Type</div>	
Mailing Address						Date		<div>M M / D D / Y Y Y Y Y Y</div>	
City		State		Zip Code		Amount		<div></div>	
Name of Federal Candidate Supported		Office Sought:		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: _____ District: _____			
Aggregate General Election Expenditure for this Candidate ▶				<div></div>					
Full Name (Last, First, Middle Initial) of Each Payee				<input type="checkbox"/> Memo Item		Purpose of Expenditure		<div>Category/ Type</div>	
Mailing Address						Date		<div>M M / D D / Y Y Y Y Y Y</div>	
City		State		Zip Code		Amount		<div></div>	
Name of Federal Candidate Supported		Office Sought:		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: _____ District: _____			
Aggregate General Election Expenditure for this Candidate ▶				<div></div>					
SUBTOTAL of Expenditures This Page (optional)..... ▶						<div></div>			
TOTAL This Period (last page this line number only)..... ▶						<div></div>			