

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE _____ OF _____
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">C</div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; vertical-align: middle; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name of Payee	Memo Item	Date of Public Distribution/Dissemination
Mailing Address		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 30%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 30%;">D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 30%;">Y Y Y Y Y Y</div> </div>
City	State	Zip Code
Purpose of Expenditure	Category/Type <div style="border: 1px solid black; padding: 2px; width: 60px;"></div>	Date of Disbursement or Obligation
Name of Federal Candidate <div style="display: inline-block; vertical-align: middle; margin-left: 10px;"> <input type="checkbox"/> Support <input type="checkbox"/> Oppose </div>		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; margin-left: 10px;"></div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____

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(a) SUBTOTAL of Itemized Independent Expenditures.....	►	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">M M / D D / Y Y Y Y Y Y</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	►	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">M M / D D / Y Y Y Y Y Y</div>
(c) TOTAL Independent Expenditures.....	►	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">M M / D D / Y Y Y Y Y Y</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____

Date

M M /

D D /

Y Y Y Y Y Y