

PAGE	OF
FOR LINE 7 OF FORM 5	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination <div><div>MM / DD / YYYY</div></div>	
Mailing Address		Amount <div><div></div></div>	
City	State	Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <div><div>House</div><div>Senate</div><div>President</div></div> State: District:	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <div><div>Support</div><div>Oppose</div></div>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <div><div>Primary</div><div>General</div><div>Other (specify)</div></div>	
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination <div><div>MM / DD / YYYY</div></div>	
Mailing Address		Amount <div><div></div></div>	
City	State	Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <div><div>House</div><div>Senate</div><div>President</div></div> State: District:	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <div><div>Support</div><div>Oppose</div></div>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <div><div>Primary</div><div>General</div><div>Other (specify)</div></div>	
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination <div><div>MM / DD / YYYY</div></div>	
Mailing Address		Amount <div><div></div></div>	
City	State	Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <div><div>House</div><div>Senate</div><div>President</div></div> State: District:	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <div><div>Support</div><div>Oppose</div></div>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <div><div>Primary</div><div>General</div><div>Other (specify)</div></div>	
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination <div><div>MM / DD / YYYY</div></div>	
Mailing Address		Amount <div><div></div></div>	
City	State	Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <div><div>House</div><div>Senate</div><div>President</div></div> State: District:	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <div><div>Support</div><div>Oppose</div></div>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <div><div>Primary</div><div>General</div><div>Other (specify)</div></div>	

(a) **SUBTOTAL** of Itemized Independent Expenditures.....▶

(b) **SUBTOTAL** of Unitemized Independent Expenditures▶

(c) **TOTAL** Independent Expenditures.....▶
 (carry total from last page forward to Line 7)