Political Committee REPORT OF RECEIPTS AND DISBURSEMENTS

| Name of Committee Better School | Initiative Monthly Report s Better Jobs | | ECEIVE |
|--|---|------------------|--|
| Address 599-C Steed Road; Ridgela | nd, MS 39157 | | AUG 1 0 2015 |
| Telephone 601-898-8875 | Fax | | Campaign Finance Secretary of State |
| Director | Treasurer Charles Lindsay | | |
| Check here if above is | different from previous report <u>TYPE OF REPORT</u> | | |
| - July , 201 (Month) | 5 Monthly Report (due 10 th of following Month) | | Mandatory |
| Termination Report (Commi make expenditures and has no outst | ttee or Individual will no longer accept contributions or anding campaign debt obligation) | Requir obliga | red to terminate reporting tions |

IMPORTANT

- A political committee that either receives contributions or makes expenditures in excess of Two Hundred Dollars (\$200.00) shall file financial reports with the Secretary of State.
- An individual person who on his or her own behalf expends in excess of Two Hundred Dollars (\$200.00) for the purpose of influencing the passage or defeat of a measure shall file financial reports with the Secretary of State.
- The financial reports required in this section shall be filed monthly, not later than the tenth day of the month following the month being reported, after a political committee or individual exceeds the contribution or expenditure limits. Financial reports must continue to be filed until all contributions and expenditures cease. In all cases a financial report shall be filed thirty (30) days following the election on a measure.
- The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the last working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

| | Itemized + | Nor | n-ltemized = | This Period | Calendar Year-To-Date |
|-------------------------------|--------------|-----|--------------|------------------|--------------------------|
| Total amount of contributions | \$ -0- | +\$ | -0- | \$ -0- | \$ 1,193,220.00 |
| Total amount of disbursements | \$202,417.10 | +\$ | -0- | \$ 202,417.10 | \$ 975,125.92 |
| Total amount of cash on hand | | | | \$ 218,094.08 | |

Authority: Refer to Miss. Code Ann. §§23-17-49 & 23-17-51 (1972) et. seq. for statutory requirements. Penalties: Fallure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. 23-15-813 (1972).

SEND TO:

Political Committees and Individuals should return this form to Secretary of State, Elections Division P. O. Box 136 Jackson, MS 39205 Or fax to 601-576-2545

through 30ly 31, 2015

| A. Full name | Date | Amount of each |
|---|---------------------------|--------------------------|
| Hederman Brothers | (Mo., Day, Year) | disbursement this period |
| Mailing Address | | 0 |
| 500 Steed Road | 7 / 1 / 15 | S 1,121.36 |
| City, State, Zip Code | 7 /7 115 | S 2,351.86 |
| Ridgeland, MS 39157 | 7 / 1 / 15 | 3 2,331.80 |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ cant'd |
| B. Full name | Date | Amount of each |
| Hederman cont'd | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 /1 / 15 | \$ 1,486.23 |
| City, State, Zip Code | 11 | \$ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 4,959.45 |
| C. Full name | Date | Amount of each |
| Performance Pros | (Mo., Day, Year) | disbursement this period |
| Malling Address | 7 /1 / 15 | S 200.00 |
| 16 North Town Square, #182 | 7_/1_/15_ | 3 200.00 |
| City, State, Zip Code | 1 1 | s |
| Jackson, MS 39216 | | |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 1,355.54 |
| D. Full name | Date | Amount of each |
| Integrity Partners | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 /6 /15 | \$ 7,500,00 |
| 6561 Scaup Street | | * */******* |
| City, State, Zip Code | 7 / 17 / 15 | \$ 7,500.00 |
| Carlsbad, CA 92011 | | * 1,11111 |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 22,500.00 |
| E, Full name | Date | Amount of each |
| VBR Design | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 / 7 / 15 | \$ 300.00 |
| 216 Highland Garrison | | |
| City, State, Zip Code | 1 / / | s |
| Ridgeland, MS 39157 Purpose of Disbursement (Optional) | | |
| | Aggregate Year-to-date | S 2,525.00 |
| F. Full name | Date | Amount of each |
| flickey Gray | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 /6 /15 | \$ 517.71 |
| 103 Keystone Place | 1 = | |
| City, State, Zip Code | 7 /7 / 15 | \$ 526.64 |
| Brandon, MS 39042 | | |
| Purpose of Disbursement (Optional) | Aggregate | \$ 4,295.69 |

through <u>July 31, 2015</u>

| A, Full name | | |
|--|---|---|
| The Pizza Shack | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Malling Address | (MO., Day, 19al) | dispulsement this period |
| 925 E, Fartification Street | 7 / 1 / 15 | \$ 119.25 |
| City, State, Zip Code | | 415 |
| Jackson, MS 39202 | ! —'—'— | \$ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 119.25 |
| B, Fuil name | Date | Amount of each |
| Mississippi Together | (Mo., Day, Year) | disbursement this period |
| Mailing Address | - | |
| P. O. Box 866 | 7 / 7 / 15 | \$ 16,000.00 |
| City, State, Zip Code | 1 , . | |
| Columbus, M5 39703 | -'-'- | S |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 16,262.60 |
| C. Full name | Date | Amount of each |
| Petty Cash | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 47 (15 | \$ 400.00 |
| 2 Old River Place | 7 / 7 / 15 | \$ 400.00 |
| City, State, Zip Code | | \$ |
| Jackson, MS 39202 | -'-'- | ₽ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 3,700.00 |
| D. Full name | Date | Amount of each |
| Blue Labs | (Mo., Day, Year) | disbursement this period |
| Malling Address | 7 / 17 / 15 | \$ 5,000.00 |
| 700-14th Street | | ф 5,000ми |
| City, State, Zip Code | 1 1 | \$ |
| Washington, D.C. 2000S | i —'—'— | ু ক |
| | | |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 69,900.00 |
| Purpose of Disbursement (Optional) E, Full name | | \$ 69,900.00 Amount of each |
| | Year-to-date | |
| E, Fuil name CSpire Mailing Address | Year-to-date Date (Mo., Day, Year) | Amount of each disbursement this period |
| E, Full name CSpire Mailing Address 5260 I-55 North | Year-to-date Date | Amount of each |
| E, Full name CSpire Mailing Address \$260 I-55 North City, State, Zip Code | Year-to-date Date (Mo., Day, Year) | Amount of each disbursement this period |
| E, Full name CSpire Malling Address 5260 I-55 North City, State, Zip Code Jackson,MS 39206 | Year-to-date Date (Mo., Day, Year) | Amount of each disbursement this period |
| E, Fuil name CSpire Mailing Address 5260 I-55 North City, State, Zip Code Jackson, MS 39206 Purpose of Disbursement (Optional) | Year-to-date Date (Mo., Day, Year) | Amount of each disbursement this period |
| E, Full name CSpire Malling Address 5260 I-55 North City, State, Zip Code Jackson,MS 39206 | Year-to-date Date (Mo., Day, Year) 7 / 17 / 15 | Amount of each disbursement this period \$ 382.20 \$ 2,676.92 Amount of each |
| E, Full nama CSpire Mailing Addrass \$260 I-55 North City, State, Zip Code Jackson, MS 39206 Purpose of Disbursement (Optional) F. Full nama Fortification E LLC | Year-to-date Date (Mo., Day, Year) 7 / 17 / 15 | Amount of each disbursement this period \$ 382.20 \$ 2,676.92 |
| E, Full name CSpire Mailing Address S2601-SS North City, State, Zip Code Jackson,MS 39206 Purpose of Disbursement (Optional) F. Full name Fortification E LLC Mailing Address | Year-to-date Date (Mo., Day, Year) 7 / 17 / 15 | Amount of each disbursement this period \$ 382.20 \$ 2,676.92 Amount of each disbursement this period |
| E, Full name CSpire Mailing Address S2601-SS North City, State, Zip Code Jackson,MS 39206 Purpose of Disbursement (Optional) F. Full name Fortification E, LLC Mailing Address 388 Highland Colony Parkway | Year-to-date Date (Mo., Day, Year) 7 / 17 / 15 | Amount of each disbursement this period \$ 382.20 \$ 2,676.92 Amount of each |
| E, Full nama CSpire Mailing Addrass \$260 I-55 North City, State, Zip Code Jackson, MS 39206 Purpose of Disbursement (Optional) F. Full nama Fortification E, LLC Mailing Address 388 Highland Colony Parkway City, State, Zip Code | Year-to-date Date (Mo., Day, Year) 7 / 17 / 15 — / — / Aggregate Year-to-date Date (Mo., Day, Year) 7 / 17 / 15 | Amount of each disbursement this period S 382.20 \$ 2,676.92 Amount of each disbursement this period S 2,154.00 |
| E, Full name CSpire Mailing Address S2601-SS North City, State, Zip Code Jackson,MS 39206 Purpose of Disbursement (Optional) F. Full name Fortification E, LLC Mailing Address 388 Highland Colony Parkway | Year-to-date Date (Mo., Day, Year) 7 / 17 / 15 | Amount of each disbursement this period \$ 382.20 \$ 2,676.92 Amount of each disbursement this period |

through Auly 31, 2015

| A. Full name Statewide General Insurance Agency | Date (Mo., Day, Year) | Amount of each disbursement this period |
|--|------------------------------------|---|
| Mailing Address | (1104, 244), 1541) | dissuisement inis period |
| 3073 Lynch Street | 7 / 17 / 15 | \$ 11,63 |
| City, State, Zip Code | | 40 |
| Jackson, MS 39209 | -'-'- | 8 |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | S 911.63 |
| B. Full name | Date | Amount of each |
| Deluxe Check Company | (Mo., Đay, Year) | disbursement this period |
| Mailing Address | 3 | |
| P. O. Box 64468 | 7 / 13 / 15 | § 116.55 |
| City, State, Zip Code | | |
| St. Paul, MN 55164 | _'_'_ | \$ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 116.55 |
| C. Full name | Date | Amount of each |
| SKD | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 .7 .15 | 42 |
| 1850 18th Street | 7 / 7 / 15 | \$ 57,088.31 |
| City, State, Zip Code | <u> </u> | |
| Washington, D.C. 20036 | _'_'_ | S |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 57,088.31 |
| D. Full name | Date | Amount of each |
| Susan Davin | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 115 115 | B1 |
| 69 Camellia Lane | 7 / 15 / 15 | \$ 240.00 |
| City, State, Zip Code | | 65 |
| Madison, MS 39110 | I —'—'— | \$ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 240.00 |
| E. Full name | Date | Amount of each |
| Berger Hirschbert Strategies | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 / 17 / 15 | S 7,853.88 |
| 1010 Vermont Ave., №W | '' | 3 7,653.68 |
| | | |
| City, State, Zip Code | | \$ |
| Washington DC 20005 | | S |
| | // Aggregate Year-to-date | S \$ 19,303.88 |
| Washington DC 20005 | | |
| Washington DC 20005 Purpose of Disbursement (Optional) F. Full name JURU, LLC | Year-to-date | \$ 19,303.88 |
| Washington DC 20005 Purpose of Disbursement (Optional) F. Full name | Year-to-date Date (Mo., Day, Year) | \$ 19,103.88 Amount of each disbursement this period |
| Washington DC 20005 Purpose of Disbursement (Optional) F. Full name JURU, LLC | Year-to-date Date | \$ 19,103.88 Amount of each |
| Washington DC 20005 Purpose of Disbursement (Optional) F. Full name JURU, LLC Mailing Address | Year-to-date Date (Mo., Day, Year) | \$ 19,103.88 Amount of each disbursement this period \$ 218.12 |
| Washington DC 20005 Purpose of Disbursement (Optional) F. Full name JURU, LLC Mailing Address P. O. 8ex 13836 | Year-to-date Date (Mo., Day, Year) | \$ 19,103.88 Amount of each disbursement this period |

through July 31, 2015

| A. Full name Office Depot | Date (Mo., Day, Year) | Amount of each disbursement this period |
|------------------------------------|---|---|
| Mailing Address | | |
| 1053 E County Line Road | $\frac{7}{2} / \frac{2}{2} / \frac{15}{15}$ | \$ 60.87 |
| City, State, Zip Code | 7 45 415 | S 115.43 |
| Jackson, MS 39211 | 7 / 6 / 15 | 3 115/43 |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | S 874.59 |
| B. Full name | Date | Amount of each |
| Patsy Brumfleld | (Mo., Day, Year) | disbursement this period |
| Mailing Address | | **** |
| 924 Poplar Boutevard | 7 / 7 / 15 | % 313.00 |
| City, State, Zip Code | 7 . 17 . 15 | |
| Jackson, M5 39202 | 7 / 13 / 15 | % 105.14 |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | S 797.07 |
| C. Full name | Date | Amount of each |
| Drew Schimmel | (Mo., Day, Year) | disbursement this period |
| Mailing Address | | |
| 249 Eastbrooke | 7 / 17 / 35 | \$ 440.83 |
| City, State, Zip Code | | m |
| Jackson, MS 39716 | <u> 7 (28) 15</u> | \$ 175.99 |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | S 448.83. 616.82. |
| D. Full name | Date | Amount of each |
| Walmart | (Mo., Day, Year) | disbursement this period |
| Malling Address | | |
| 5520 Highway 80 East | 7/ <u>17_</u> / <u>15</u> | S 132.76 |
| City, State, Zip Code | | _ |
| Pearl, MS 39708 | ''- | S |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 356.66 |
| E. Full name | Date | Amount of each |
| Signs First Metro | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 (20 / 15 | 4P |
| 5020 Highway 80 East | 7 / 20 / 15 | \$ 2156.05 |
| City, State, Zip Gode | , , | s |
| Pearl, MS 39208 | | • |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 8,421,06 |
| F. Full name | Dato | Amount of each |
| Nancy Koho Consulting, LEC | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 (24) 15 | \$ 7500.00 |
| 101 W. Grand | 7 / 24 / 15 | \$ 7,500,00 |
| City, State, Zip Code | | e |
| Chicago, IL 60654 | // | 8 |
| | | |

through July 31, 2015

| A. Full name | Date | Amount of each |
|------------------------------------|---------------------------|--------------------------|
| Ricah | (Mo., Day, Year) | disbursement this period |
| Mailing Address | | 1 |
| 386-A Highland Colony Parkway | 7 / 13 / 15 | \$ 1,334.68 |
| City, State, Zip Code | 7 | 40 |
| Ridgeland, M\$ 39157 | 7 / 28 / 15 | \$ 485.39 |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | S 6,597.08 |
| B. Full name | Date | Amount of each |
| Charles Taylor | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 . 7 . 16 | 4 |
| 4403 Azaiea Drive | 7 / 7 / 15 | \$ 387.93 |
| City, State, Zip Code | 7 . 17 . 16 | |
| Jackson, MS 39206 | 7 / 17 / 15 | \$ 480.75 |
| Perpose of Disbursement (Optional) | Aggregate Year-to-date | S Contd |
| C. Full name | Date | Amount of each |
| Taylor (cont'd) | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 / 27 / 15 | \$ 335.81 |
| City, State, Zip Code | 7 / 27 / 15 | \$ 33.51 |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | S 3,142.85 |
| D. Full name | Date | Amount of each |
| Marlin Strategies | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 / 27 / 15 | \$ 751.61 |
| 1331 S. Eads Street | 7 / 27 / 15 | 3 /51.01 |
| City, State, Zip Code | 1 1 | e e |
| Arlington, VA 22202 | | \$ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 1,216.86 |
| É. Full name | Date | Amount of each |
| Jarrius Adams | (Mo., Day, Year) | disbursement this period |
| Malling Address | 7 /31 /15 | # |
| 107 Northwest Circle | 7 / 31 / 15 | \$ 1,500.00 |
| City, State, Zip Code | 1 1 | s |
| Hattiesburg, MS 39401 | | * |
| Purpose of Dishursement (Optional) | Aggregate Year-to-date | \$ 1,500.00 |
| F. Full name | Date | Amount of each |
| Michael Morris | (Mo., Day, Year) | disbursement this perlod |
| Malling Address | 7 134 155 | \$ 254.73 |
| 5707 George Washington Drive | 7 / 24 / 15 | S 354.71 |
| City, State, Zip Code | 7 .77 .44 | D 140.70 |
| ackson, MS 39213 | 7 / 27 / 15 | \$ 148,7D |
| Purpose of Disbursement (Optional) | Aggregate | ··· |

through July 31, 2015

| A. Full game | Date | Amazzut af ac-la |
|--|---------------------------|---|
| Donna Echois | (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | | |
| P.O. Box 16212 | 7 / 8 / 15 | \$ 949.90 |
| City, State, Zip Code | 7 | S |
| Jackson, MS 39236 | 7 / 27 / 15 | S 1,483.27 |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 2,982.11 |
| B, Full name | Date | Amount of each |
| Wholesale Service Center | (Mo., Day, Year) | disbursement this period |
| Malling Address | 7 . 10 . 15 | |
| 7300 Turfway Drive | 7 / 30 / 15 | \$ 68,698,82 |
| City, State, Zip Code | | |
| Florence, KY 41042 | / | S |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 447,939.13 |
| C. Full name | Date | Amount of each |
| Amber Thomas | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 (17 (15 | \$ 638.55 |
| 1522 Luter Lane | 7 / 17 / 15 | J 658.55 |
| City, State, Zip Code | 7 / 31 / 15 | \$ 193.90 |
| Jackson, M5 39209 | 1 - 1 - 1 - 1 - 1 - 1 | \$ 193.90 |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 1,912.40 |
| D. Full name | Date | Amount of each |
| Michael Rejebtan | (Mo., Đay, Year) | disbursement this period |
| Malling Address | 7 / 17 / 15 | S 317.00 |
| 120 N. Congress Street | | 3 317.00 |
| City, State, Zip Code | 1 1 | s |
| Jackson, MS 39201 | | p |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 317.00 |
| E. Full name | Date | Amount of each |
| Bruce Catering | (Mo., Day, Year) | diabursement this period |
| Mailing Address | 7 / 30 / 15 | \$ 650.00 |
| 971 Legion Drive | | ф 636.60 |
| City, State, Zip Code | | S |
| Greenville, MS 38701 | | |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 650.00 |
| F. Full name | Date | Amount of each |
| Michael Morris (continued from Page 5) | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 7 / 24 / 15 | S 157.05 |
| 6707 George Washington Drive | | - 131100 |
| City, State, Zip Code | 1 1 | S |
| Jackson, MS 39213 | | 5 |
| Purpose of Disbursement (Optional) | Aggregate | \$ 1,123.80 |

through ^{July 31, 2015}

| A. Full name | | |
|------------------------------------|---------------------------|--|
| Metro Jackson Youth Initiative | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | | <u> </u> |
| 219 5. President Street | 7 / 21 / 15 | \$ 75.00 |
| City, State, Zip Code | | · · · · · · · · · · · · · · · · · · · |
| Jackson, MS 39201 | // | S |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 75.00 |
| 3. Full name | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | | \$ |
| City, State, Zip Code | | S |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ |
| C. Full name | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | // | \$ |
| City, State, Zip Code | | s |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | s |
| D. Full name | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | // | S |
| City, State, Zip Code | | \$ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ |
| E. Fuli name | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | | S |
| City, State, Zip Code | // | \$ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ |
| F. Full name | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | | S |
| City, State, Zip Code | / | S |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ |

| rage it of it | Page | 1 | øf | 1 |
|---------------|------|---|----|---|
|---------------|------|---|----|---|

| Name of Candidate or Committee | Better Schools Better Jobs |
|--------------------------------|----------------------------|
| Reporting period Fuly 1, 2015 | through |

ITEMIZED RECEIPTS

| A. Source: Corporation PAC Individual Loan Other (please specify) | Date (Mo., Day, Year) | Amount of each recelpt this period |
|--|--|--|
| Full name No Receipts during Period | | \$ [|
| Mailing Address | | |
| | | \$ |
| City, State, Zip Code | | \$ |
| Name of Employer (Required) | | \$ [|
| Occupation (Required) | Aggregate year-to-date | \$ |
| B. Source: Corporation PAC Individual Loan | Date | Amount of each |
| Other (please specify) | (Mo., Day, Year) | receipt this period |
| Full name | | \$ [|
| Mailing Address | | \$ [|
| City, State, Zip Code | | \$ |
| Name of Employer (Required) | | \$ [|
| Occupation (Required) | Aggregate | \$ [|
| <u> </u> | year-to-date | • |
| C. Source Corporation PAC Individual Loan Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period |
| <u></u> | Date | receipt |
| Other (please specify) | Date | receipt this period |
| Other (please specify) | Date | receipt this period |
| Other (please specify) Full name Mailing Address City, State, Zip Code | Date | receipt this period |
| Other (please specify) Full name Mailing Address City, State, Zip Code Name of Employer (Required) | Date | receipt this period |
| Other (please specify) Full name Mailing Address City, State, Zip Code Name of Employer (Required) Occupation (Required) | Date (Mo., Day, Year) | **Teceipt this period \$ |
| Other (please specify) Full name Mailing Address City, State, Zip Code Name of Employer (Required) Occupation (Required) D. Source: Corporation PAC Individual Loan Other (please specify) | Date (Mo., Day, Year) | receipt this period \$ |
| Other (please specify) Full name Maliling Address City, State, Zip Code Name of Employer (Required) Occupation (Required) D. Source: Corporation PAC Individual Loan | Date (Mo., Day, Year) ///// //// //// Aggregate year-to-date Date | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ |
| Other (please specify) Full name Mailing Address City, State, Zip Code Name of Employer (Required) Occupation (Required) D. Source: Corporation PAC Individual Loan Other (please specify) | Date (Mo., Day, Year) ///// //// //// Aggregate year-to-date Date | \$ Amount of each receipt this period |
| Other (please specify) Full name Mailing Address City, State, Zip Code Name of Employer (Required) Occupation (Required) D. Source: Corporation PAC Individual Lean Other (please specify) | Date (Mo., Day, Year) ///// //// //// Aggregate year-to-date Date | s Amount of each receipt this period \$ |
| Other (please specify) Eull name Majiing Address City, State, Zip Code Name of Employer (Required) Occupation (Required) D. Source: Corporation PAC Individual Lean Other (please specify) Full name Mailing Address | Date (Mo., Day, Year) ///// //// //// Aggregate year-to-date Date | s Amount of each receipt this period \$ |
| Other (please specify) Full name Majiing Address City, State, Zip Code Name of Employer (Required) Occupation (Required) D. Source: Corporation PAC Individual Loan Other (please specify) Full name Majiing Address City, State, Zip Code | Date (Mo., Day, Year) ///// //// //// Aggregate year-to-date Date | s Amount of each receipt this period \$ |