## **ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE**

1. Candidate or Committee Nai	me:		
	e: End Date:		
_	s from preceding page (enter \$0 if first page)		
COMPLETE THE APPROPRIATE	ITEMS FOR EACH ITEMIZED CONTRIBUTION.		
Business or Organization Name	::		OR
First Name:	Middle Name:	Last Name:	
Address:	City:	State: Zip Code:	
Occupation:	Employer:		
Contribution Received For:	Primary Election General Election	Runoff (Local Elections Only)	
Amount of Contribution: \$	Date of Contribution:	Aggregate This Election: \$	
Business or Organization Name	<b>:</b>		OR
First Name:	Middle Name:	Last Name:	
Address:	City:	State: Zip Code:	
	Employer:		
	Primary Election General Election		
Amount of Contribution: \$	Date of Contribution:	Aggregate This Election: \$	
Business or Organization Name	o:		OR
	Middle Name:		
	City:		
	Employer:		
Contribution Received For:	Primary Election General Election	Runoff (Local Elections Only)	
Amount of Contribution: \$	Date of Contribution:	Aggregate This Election: \$	
Business or Organization Name	): 		OR
First Name:	Middle Name:	Last Name:	
Address:	City:	State: Zip Code:	
	Employer:		
	Primary Election General Election		
Amount of Contribution: \$	Date of Contribution:	Aggregate This Election: \$	
Total Contributions: \$ (Carry forward to the next pa amount must be shown in th	ge if additional pages of this form are used. If	this is the last page of contributions,	this

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