

Statement of Political Party Restricted Fund Deposits

Prescribed by Secretary of State 3/05

Name of Committee in Full									
Name of Donor					Registration Number, if PAC				
Street Address								Form (Cash, Check, etc.)	
City		State	Zip Code		M	D	Y	Amount	
Name of Donor					Registration Number, if PAC				
Street Address								Form (Cash, Check, etc.)	
City		State	Zip Code		M	D	Y	Amount	
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Street Address								Form (Cash, Check, etc.)	
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Name of Donor					Registration Number, if PAC				
Street Address								Form (Cash, Check, etc.)	
City		State	Zip Code		M	D	Y	Amount	

Note: If committee received deposits from corporations or labor organizations, report must be filed electronically with secretary of state.