## **ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE**

1. Candidate or Committee Name:				
2. Reporting Period: Start Date: End Da	ate:			
3. Complete the appropriate items for each obligation owed to	o a person/vendor at th	ne end of the re	eporting period	d.
Business Name:	Description of Obligation:			
First Name: Middle Name:				
Last Name:	_			
Address:		Debt	Payments	Outstanding
City:	Balance (Period — Beginning)	Incurred This Period	This Period	Balance (Period End)
State: Zip Code:	\$	\$	\$	\$
	Description of	T		
Business Name:	Description of Obligation:			
First Name: Middle Name:	_			
Last Name:			1	
Address:	Outstanding Balance (Period	Debt Incurred	Payments This Period	Outstanding Balance
City:	Beginning)	This Period		(Period End)
State: Zip Code:	\$	\$	\$	\$
	Description of	<u> </u>		
Business Name:	Description of Obligation:			
First Name: Middle Name:	_			
Last Name:			Т	<u> </u>
Address:	Outstanding Balance (Period	Debt Incurred	Payments This Period	Outstanding Balance
City:		This Period		(Period End)
State: Zip Code:	\$	\$	\$	\$
	Description of			
Business Name:	Obligation:			
First Name: Middle Name:	_			
Last Name:		D.1.	<u>l., .</u>	To
Address:	Outstanding Balance (Period	Debt Incurred	Payments This Period	Outstanding Balance
City:	Beginning)	This Period	\$	(Period End)
State: Zip Code:		<del>}</del>	<del>'</del>	<sup>3</sup>
TOTALS				
(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the	Outstanding Balance (Period Beginning)	Debt Incurred	Payments This Period	Outstanding Balance (Period End)
Total from "Outstanding Balance - (Period End)" column	Ś	Ś	s	Ś

must also be shown on the summary on first page.)