

Statement of Non-Monetary Contributions

Full Name of Committee/Person:		
Contributor Name (Individual/Entity):		
Address:	City/State/Zip:	
Occupation & Employer (required)		
Date Contribution Accepted:	Fair Market Value:	
Description:		
Contributor Name (Individual/Entity):		
Address:	City/State/Zip:	
Occupation & Employer (required)		
Date Contribution Accepted:	Fair Market Value:	
Description:		
Contributor Name (Individual/Entity):		
Address:	City/State/Zip:	
Occupation & Employer (required)		
Date Contribution Accepted:	Fair Market Value:	
Description:		

Contributor Name (Individual/Entity):		
Address:	City/State/Zip:	
O/realised		
Occupation & Employer (required)		
Date Contribution Accepted:	Fair Market Value:	
December Comp.		
Description:		
Contributor Name (Individual/Entity):		
Address:	City/State/Zip:	
Occupation & Employer (required)		
Occupation & Employer (required)		
Date Contribution Accepted:	Fair Market Value:	
Description		
Description:		
Contributor Name (Individual/Entity):		
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Address:	City/State/Zip:	
Occupation & Employer (required)		
Occupation & Employer (required)		
Date Contribution Accepted:	Fair Market Value:	
December Name		
Description:		