## Form **8872**

## Political Organization Report of Contributions and Expenditures

Department of the Treasury Internal Revenue Service

► See separate instructions.

OMB No. 1545-1696

Α	For the period beginning	, 20 and ending	, 20
	_		
В	Check applicable boxes: Initial report	☐ Change of address ☐ Amended	I report
1	Name of organization		Employer identification number
2	Mailing address (P.O. Box or number, street, and ro	oom or suite number)	·
	•		
	City or town, state, and ZIP code		
	•		
3	E-mail address of organization		4 Date organization was formed
	· ·		· ·
5a	Name of custodian of records	5b Custodian's address	
6a	Name of contact person	6b Contact person's address	
	·	·	
7	Business address of organization (if different from m	nailing address shown above). Number, street, and roo	om or suite number
	ů ,	, , , ,	
	City or town, state, and ZIP code		
	•		
8	Type of report (check only one box)		
		f Monthly report for the month of:	
_	First quarterly report (due by April 15)	(due by the 20th day following the	month shown above, except the
а	First quarterly report (due by April 15)	December report, which is due by Ja	
b	Second quarterly report (due by July 15)	g Pre-election report (due by the 12th of	or 15th day before the election
b	Second quarterly report (due by July 13)	g Pre-election report (due by the 12th of	n 13th day before the election;
_	Third quarterly report (due by October 15)	(2) 5	
С	Third quarterly report (due by October 13)	(3) For the state of:	
	Year-end report (due by January 31)	(3) For the state of.	
d	Teal-end report (due by January 31)	h Post-general election report (due by t	the 20th day offer general election
_	Nied was was set (Nieu alasticus	(2) 5	, ,
е	Mid-year report (Non-election year only-due by July 31)	<b>,</b> ,	
	you. o.my due 2) outy o.,	(2) For the state of:	
_	<del>-</del>		9
9	Total amount of reported contributions (total from a	attached <b>Schedules A</b> )	3
10	Total amount of reported expenditures (total from al	Il attached Schedules R\	10
10		,	
	and belief, it is true, correct, and complete.	nined this report, including accompanying schedules and stater	nents, and to the best of my knowledge
Sig	n		
He	re 📗	<b>k</b>	
	Signature of authorized official	Date	
	y Signature of authorized official		

	Employer identification number
	Employer identification number
Name of contributor's employer	Amount of contributions reported for this period
Contributor's occupation	
Aggregate contributions year-to-date • \$	\$
Name of contributor's employer	Amount of contributions reported for this period
Contributor's occupation	
Aggregate contributions year-to-date ▶ \$	\$
	Amount of contributions reported for this period
Contributor's occupation	
Aggregate contributions year-to-date ▶ \$	\$
Name of contributor's employer	Amount of contributions reported for this period
Contributor's occupation	
Aggregate contributions year-to-date ▶ \$	\$
Name of contributor's employer	Amount of contribution reported for this period
Contributor's occupation	
Aggregate contributions year-to-date ▶ \$	\$
Name of contributor's employer	Amount of contributions reported for this period
Contributor's occupation	
Aggregate contributions year-to-date ▶ \$	\$
Name of contributor's employer	Amount of contributions reported for this period
Contributor's occupation	
Aggregate contributions year-to-date ▶ \$	\$
Name of contributor's employer	Amount of contributions reported for this period
Contributor's occupation	
Aggregate contributions year-to-date • \$	\$
Name of contributor's employer	Amount of contribution reported for this period
Contributor's occupation	
Aggregate contributions year-to-date ▶ \$	\$
	Contributor's occupation  Aggregate contributions year-to-date

chedule B Itemized Expenditures		Schedule B page of
Name of organization		Employer identification number
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period
	Recipient's occupation	
		\$
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period
	Recipient's occupation	
		\$
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported fo this period
	Recipient's occupation	
		\$
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported fo this period
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	\$ Amount of each
recipient s name, mailing address and 21F code	Name of recipient's employer	expenditure reported fo
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported fo this period
	Recipient's occupation	
		\$
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported fo this period
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	\$ Amount of each
isosponio nano, mamig addicio dia 21 codo	Tallio C. Isospiolio S. Ispisyo.	expenditure reported fo this period
	Recipient's occupation	
		\$
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported fo this period
	Recipient's occupation	
		\$