

**INDEPENDENT EXPENDITURE NOTIFICATION FORM FOR
CORPORATIONS, LIMITED LIABILITY COMPANIES, AND LABOR ORGANIZATIONS**

Total Amount of Expenditures this Notification:	Election Year	Filer ID:	For Office Use Only Expenditure Status:
<input type="checkbox"/> Initial Expenditure <input type="checkbox"/> Additional Expenditure			Unverified: _____ Delinquent: _____ Verified: _____

Full Name of Corporation, LLC, or Labor Organization (as registered for making independent expenditures)			
Address		E-mail Address	
City	State	Zip Code	Phone Number

Expenditure Date:		Expenditure Amount:	
Vendor/Payee Name:			
Candidate Name:			<input type="checkbox"/> Supports
Candidate Office:	<input type="checkbox"/> Mayor <input type="checkbox"/> Council Member, Dist. #		<input type="checkbox"/> Opposes
Communication Type:	<input type="checkbox"/> Communications <input type="checkbox"/> Travel <input type="checkbox"/> Professional Services <input type="checkbox"/> Event Expenses <input type="checkbox"/> Overhead <input type="checkbox"/> Administration <input type="checkbox"/> Miscellaneous		
Description of Purchase:	Please use a description from the list of subcategories provided.		

Expenditure Date:		Expenditure Amount:	
Vendor/Payee Name:			
Candidate Name:			<input type="checkbox"/> Supports
Candidate Office:	<input type="checkbox"/> Mayor <input type="checkbox"/> Council Member, Dist. #		<input type="checkbox"/> Opposes
Communication Type:	<input type="checkbox"/> Communications <input type="checkbox"/> Travel <input type="checkbox"/> Professional Services <input type="checkbox"/> Event Expenses <input type="checkbox"/> Overhead <input type="checkbox"/> Administration <input type="checkbox"/> Miscellaneous		
Description of Purchase:	Please use a description from the list of subcategories provided.		

See other side or attached form for additional expenditures for this notification.

Signature Date

Expenditure Date:		Expenditure Amount:	
Vendor/Payee Name:			
Candidate Name:			<input type="checkbox"/> Supports
Candidate Office:	<input type="checkbox"/> Mayor <input type="checkbox"/> Council Member, Dist. #		<input type="checkbox"/> Opposes
Communication Type:	<input type="checkbox"/> Communications <input type="checkbox"/> Travel <input type="checkbox"/> Professional Services <input type="checkbox"/> Event Expenses <input type="checkbox"/> Overhead <input type="checkbox"/> Administration <input type="checkbox"/> Miscellaneous		
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Candidate Office:	<input type="checkbox"/> Mayor <input type="checkbox"/> Council Member, Dist. #		<input type="checkbox"/> Opposes
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Description of Purchase:	Please use a description from the list of subcategories provided.		

LIST OF COMMUNICATION TYPES
(in bold-faced type and shaded boxes*)
AND
DESCRIPTION OF PURCHASES
(list of subcategories below communication type*)

COMMUNICATIONS	EVENT EXPENSES
Advertising	Event site rentals
Mailings	Food/refreshments
TV	Postage/delivery
Radio	Entertainment
Newspapers	Decorations/supplies
Postcards	Printing/photocopies
Postage	Sound system
Flyers/handouts/door hangers	Table chair rentals
Signs	Prizes
Newsletters	Parade fees
Production cost	Insurance
Bumper stickers	Other
Other	
TRAVEL	OVERHEAD
Fuel	Rent
Meals	Utilities
Lodging	Office supplies
Rental fee	PO Box rental
Mileage	Maintenance/repair
Airfare	Storage
Taxi	Software
Parking	Other
Other	
ADMINISTRATION	MISCELLANEOUS
Payroll	Hardware, lumber/rebar
Income Tax	Petitions
Employee related cost	Petty cash
Bank fees/service charge	Membership dues
Penalties/fines	Subscriptions
Insurance	Sign installation
Other	Other
PROFESSIONAL SERVICES	
Accountant/bookkeeper	Sign installation
Attorney fees	Telemarketing/auto dialers
Consultants	Training
Information Technology Services	Translation services
Mailing services	Voter list
Photography	Website/graphic design
Polling/Research	Other

*Types and descriptions match the Secretary of State's on-line reporting system