Section R ADDITIONAL PAGE _____ of _____

NAME OF COMMITTEE *(Provide Complete Name as Registered with Filing Repository)*	TYPE OF REPORT

R. Expenses Incurred on Committee Credit Card

Name of Issuing Institution

Type of Credit Card:
Visa Master Card Discover American Express Other:

Name of Vendor, Person or Entity | Date of Transaction

Street Address | City | State | Zip Code

Purpose of Expenditure (by code) | Description | Event # | **Amount**

Expenditure # *(if applicable)*

Type of Expenditure ***(Itemization in Addendum R Required unless "None of the below" is checked)***

None of the below
Coordinated with reimbursement sought (joint expenditure) Independent
Coordinated without reimbursement sought (in-kind contribution) Organization: **A** **B** **C** **D**

Name of Vendor, Person or Entity | Date of Transaction

Street Address | City | State | Zip Code

Purpose of Expenditure (by code) | Description | Event # | **Amount**

Expenditure # *(if applicable)*

Type of Expenditure ***(Itemization in Addendum R Required unless "None of the below" is checked)***

None of the below
Coordinated with reimbursement sought (joint expenditure) Independent
Coordinated without reimbursement sought (in-kind contribution) Organization: **A** **B** **C** **D**

Name of Vendor, Person or Entity | Date of Transaction

Street Address | City | State | Zip Code

Purpose of Expenditure (by code) | Description | Event # | **Amount**

Expenditure # *(if applicable)*

Type of Expenditure ***(Itemization in Addendum R Required unless "None of the below" is checked)***

None of the below
Coordinated with reimbursement sought (joint expenditure) Independent
Coordinated without reimbursement sought (in-kind contribution) Organization: **A** **B** **C** **D**

SUBTOTAL Section R — This Page	
TOTAL of additional Section R Pages	
TOTAL OF ALL EXPENSES INCURRED ON COMMITTEE CREDIT CARD *(Enter total on Line 27, Column A of Summary Page Totals)*	