

Section J3. ADDITIONAL PAGE ____ of ____

NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Commission)</i>				TYPE OF REPORT	
J3. In-Kind Donations Not Considered Contributions					
Name of Donor					
Street Address			City		State
Zip Code					
Donation Given By:	Description of Donation				Fair Market Value of Donation
<input type="checkbox"/> Individual					
<input type="checkbox"/> Business Entity	Date Received	Event #		Aggregate Value for this Event	
<input type="checkbox"/> Sole Proprietorship					
Name of Donor					
Street Address			City		State
Zip Code					
Donation Given By:	Description of Donation				Fair Market Value of Donation
<input type="checkbox"/> Individual					
<input type="checkbox"/> Business Entity	Date Received	Event #		Aggregate Value for this Event	
<input type="checkbox"/> Sole Proprietorship					
Name of Donor					
Street Address			City		State
Zip Code					
Donation Given By:	Description of Donation				Fair Market Value of Donation
<input type="checkbox"/> Individual					
<input type="checkbox"/> Business Entity	Date Received	Event #		Aggregate Value for this Event	
<input type="checkbox"/> Sole Proprietorship					
Name of Donor					
Street Address			City		State
Zip Code					
Donation Given By:	Description of Donation				Fair Market Value of Donation
<input type="checkbox"/> Individual					
<input type="checkbox"/> Business Entity	Date Received	Event #		Aggregate Value for this Event	
<input type="checkbox"/> Sole Proprietorship					
Name of Donor					
Street Address			City		State
Zip Code					
Donation Given By:	Description of Donation				Fair Market Value of Donation
<input type="checkbox"/> Individual					
<input type="checkbox"/> Business Entity	Date Received	Event #		Aggregate Value for this Event	
<input type="checkbox"/> Sole Proprietorship					
Name of Donor					
Street Address			City		State
Zip Code					
SUBTOTAL Section J3 — This Page					