

**Section S. ADDITIONAL PAGE** \_\_\_\_\_ of \_\_\_\_\_

NAME OF COMMITTEE			TYPE OF REPORT		
<b>S. Expenses Incurred by Committee but Not Paid During this Period</b>					
Name of Creditor			Date Incurred		
Street Address		City		State	Zip Code
Purpose of Expenditure (by code)	Description		Event #		<b>Amount Incurred</b> <i>(Estimate or Actual)</i>
Expenditure # (if applicable)	Type of Expenditure (if applicable) <b>Itemization in Addendum S Required</b> <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization: <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D				
Name of Creditor			Date Incurred		
Street Address		City		State	Zip Code
Purpose of Expenditure (by code)	Description		Event #		<b>Amount Incurred</b> <i>(Estimate or Actual)</i>
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<b>SUBTOTAL Section S-This Page</b>					