

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

NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Commission)</i>	TYPE OF REPORT

**K. In-Kind Contributions**

Name			
Street Address	City	State	Zip Code

Is this contribution associated with an event reported in Section J1? <i>If yes, list Event #:</i> _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Description of In-Kind Contribution
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Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Fair Market Value of this Contribution</b>
Type of Contributor: <input type="checkbox"/> Individual <input type="checkbox"/> Committee <input type="checkbox"/> Sole Proprietorship		Date Received	

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<b>SUBTOTAL Section K — This Page</b>	
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