## FORM 2: Contributions received by candidate or elected official



NAME OF CANDIDATE OR ELECTED OFFICIAL: \_\_\_\_\_

When total contribut	ions from a single source exceed \$100.00, the FCPA requires all contrib <b>D NOT LIST</b> in-kind contributions or loans on this form. Use Forms 3 ar	outior d 4 fe	ns fro or th	om th ose l	nat se isting	ourco gs.	e to be itemized.	
<b>CONTRIBUTOR</b> (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE	AMOUNT
		Business or Corporation	Individual	PAC	Other	Returned	CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
FORM REVISED 9.2.2011	TOTAL CASH CON	TRI	BU	тю	NS	TH	IIS PAGE	