

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

ADDRESS (number and street) ▼

P.O. Box 26366

☐ Check if different than previously reported. (ACC)

Alexandria

VA

22313

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00412098

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☒ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ray Aley

Signature of Treasurer

Ray Aley

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
10 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		44155.82
(b) Cash on Hand at Beginning of Reporting Period.....	53931.89	
(c) Total Receipts (from Line 19)	15700.00	86205.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	69631.89	130360.99
7. Total Disbursements (from Line 31)	326.15	61055.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	69305.74	69305.74
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2015			

To:

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2015			

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

14900.00

78450.00

(ii) Unitemized

800.00

7755.17

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

15700.00

86205.17

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

15700.00

86205.17

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

15700.00

86205.17

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

15700.00

86205.17

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	326.15	2055.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	326.15	2055.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	59000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	326.15	61055.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	326.15	61055.25

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	15700.00	86205.17
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15700.00	86205.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	326.15	2055.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	326.15	2055.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 11
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Full Name (Last, First, Middle Initial)

A. Debra A. Ashmore

Mailing Address PO Box 608

City State Zip Code
 McAlester OK 74502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kentucky Fried Chicken of McAlester OK

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : 2907

Amount of Each Receipt this Period

900.00

Full Name (Last, First, Middle Initial)

B. Frederick Bauer

Mailing Address 1311 South State Route 48

City State Zip Code
 Ludlow Falls OH 45339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bauer Foods LLC

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : 2905

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Kathleen A. Bouwman

Mailing Address 105 W Bellevue

City State Zip Code
 Big Rapids MI 49307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Danielle Inc

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 08 / 2015

Transaction ID : 2912

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1700.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 11
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Full Name (Last, First, Middle Initial)

A. Keith D. ChambersMailing Address 5020 State Route 247
PO Box 826

City	State	Zip Code
Hillsboro	OH	45133

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chambers Management

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

Transaction ID : 2903

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Sharon Clawson

Mailing Address 3190 Deerfield

City	State	Zip Code
Clinton	IL	61727

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barlett Mgt

Occupation

Corp Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2015

Transaction ID : 2911

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Holly E. Helf

Mailing Address 6370 N. Lake Dr.

City	State	Zip Code
Milwaukee	WI	53217

FEC ID number of contributing
federal political committee.

C

Name of Employer

H&K Partners

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2015

Transaction ID : 2897

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1800.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 11

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Full Name (Last, First, Middle Initial)

A. Michael Kulp

Mailing Address 8900 Indian Creek Pkwy, Ste 100

City State Zip Code
Overland Park KS 66210

FEC ID number of contributing
federal political committee.

C

Name of Employer

KBP Foods

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 07 / 2015

Transaction ID : 2908

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. John Masters

Mailing Address 29600 Southfield Road, #2

City State Zip Code
Southfield MI 48076

FEC ID number of contributing
federal political committee.

C

Name of Employer

NJM Management

Occupation

President/Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2015

Transaction ID : 2899

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. David R. Myles

Mailing Address 3990 Hitchings St.

City State Zip Code
FORT GRATIOT MI 48059

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mich-Care Inc.

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2015

Transaction ID : 2901

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 11

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Full Name (Last, First, Middle Initial)

A. Johnny W. Outlaw

Mailing Address 816 Mill Street

City State Zip Code
Camden SC 29020

FEC ID number of contributing
federal political committee.

C

Name of Employer

Outlaw Ent. Inc.

Occupation

Small Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : 2894

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

B. John T. Sims

Mailing Address 120 Seminole Lane
KFC Sparta

City State Zip Code
Loudon TN 37774

FEC ID number of contributing
federal political committee.

C

Name of Employer

KFC Sparta

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : 2898

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

c. Shirley Stringham Vangeloff

Mailing Address 22114 Telegraph Road

City State Zip Code
Southfield MI 48033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vangeloff Mgmt.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 08 / 2015

Transaction ID : 2910

Amount of Each Receipt this Period

1900.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 11
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Full Name (Last, First, Middle Initial)

A. Peter Wasilevich Jr.

Mailing Address 8207 22nd Ave, Ste 160

City	State	Zip Code
Kenosha	WI	53143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Chicken Champs IncOccupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2015

Transaction ID : 2896

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. William E. West

Mailing Address 220 North Sixteenth Ave

City	State	Zip Code
Laurel	MS	39442

FEC ID number of contributing
federal political committee.

C

Name of Employer
West Quality Food Service IncOccupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2015

Transaction ID : 2895

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

2000.00

TOTAL This Period (last page this line number only)..... ►

14900.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Full Name (Last, First, Middle Initial)

A. Square Inc

Mailing Address 110 5th Street

City	State	Zip Code
San Francisco	CA	94510

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	
<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2015

Transaction ID : 2914

Amount of Each Disbursement this Period

326.15

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	
<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	
<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

326.15

326.15
