

Schedule A Itemized Contributions		Schedule A page of
Name of organization		Employer identification number
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Subtotal of contributions reported on this page only. Enter here and also include this amount in the total on line 9 of Form 8872 ▶		\$

Schedule B **Itemized Expenditures** Schedule B page _____ of _____

Name of organization _____ **Employer identification number** _____

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure

Purpose of expenditure _____

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure

Purpose of expenditure _____

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure

Purpose of expenditure _____

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure

Purpose of expenditure _____

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure

Purpose of expenditure _____

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure

Purpose of expenditure _____

Subtotal of expenditures reported on this page only. Enter here and also include this amount in the total on line 10 of Form 8872 **\$** _____

