SCHEDULE C:

BANK INTEREST, REFUNDED EXPENDITURES AND REBATES

MUST BE TYPED OR PRINTED LEGIBLY IN INK

REPORTING PERIOD: _____ THROUGH: _____

PAGE: _____ OF: _____

_____

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

COLUMN 1 FULL NAME AND ADDRESS OF PAYER [LIST IN ALPHABETICAL ORDER]	COLUMN 2 REASON/TYPE OF PAYMENT	COLUMN 3 DATE RECEIVED	COLUMN 4 PAYMENT AMOUNT
FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.		**TOTAL THIS PERIOD** [ENTER ON **LAST PAGE** OF SCHEDULE C **AND** ON **LINE 6** OF SCHEDULE G.]	