COMMITTEE SCHEDULE B—ALL OTHER FUNDS

Amended: ☐

Full Legal Name of Candidate (if applicable)	Full Name of Committee	
Eugenia Cue	CFDL	
Type of Report Partial Quarter	Reporting Period: 1/1/21-1/31/21	Number (if assigned)

Date	Type of Other Funds	Description of Other Funds	Amount	Reporting Period Total	Aggregate Total

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COMMITTEE SCHEDULE B—ALL OTHER FUNDS

Amended: ☐

Full Legal Name of Candidate (if applicable)	Full Name of Committee	
Eugenia Cruz	Cruz 4D2	
Type of Report Partial Quarter	Reporting Period: 7/1/21 – 1/31/21	Number (if assigned) 1

Date	Type of Other Funds	Description of Other Funds	Amount	Reporting Period Total	Aggregate Total
					NA