## COMMITTEE SCHEDULE B—TRANSFERS AND OTHER FUNDS RECEIVED

					Amended:
Full Legal Name of Candida	ite (if applicable)	Full Name of Co	mmittee 4	D7 - 1	
Type of Report	( 4.	Reporting Period:	_	12/3/121	Number (if assigned)

Date	Type of Other Funds	Description of Other Funds	Amount	Reporting Period Total	Aggregate Total
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	Select from Drop Down		OFFICE	A.M. 12'.41 P.	Л. LERK