STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE B
CONTRIBUTIONS TO CANDIDATES
NONCANDIDATE COMMITTEE

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NONCANDIDATE COMMITTEE NAME: PAGE _____ OF _____

DATE OF CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF CANDIDATE	AMOUNT OF CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE

1. SUBTOTAL OF CONTRIBUTIONS TO CANDIDATES THIS PERIOD (THIS PAGE)..... _____
2. TOTAL OF CONTRIBUTIONS TO CANDIDATES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 12, COLUMN A)..... _____