# STATE OF HAWAII
# CAMPAIGN SPENDING COMMISSION

## SCHEDULE C
## EXPENDITURES
## NONCANDIDATE COMMITTEE

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NONCANDIDATE COMMITTEE NAME: PAGE _____ OF _____

| DATE OF EXPENDITURE | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION | PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION | AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD |
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1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... _____
2. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 13, COLUMN A)..... _____