

Schedule B - Itemized Expenditures Statement (\$20 or more)

[C.R.S. 1-45-108-(1) (a)]

Full Name of Committee/Person: Thornton Professional Firefighters Local 2376

Reporting Period Covered: 10/28/19
date **Through** 11/30/19
date

Total Itemized Expenditures: 1,000.00

PLEASE PRINT/TYPE

1 <u>Date Expended</u> 11/8/19	4 Name (Last, First): <u>Phillips, Jacque</u>
2 <u>Amount</u> \$ 1000.00	5 Address: <u>8960 Fox Dr. Unit 204</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: <u>Thornton, CO 80260</u>
	7 Purpose of Expenditure: <u>2019 Campaign support</u>

1 <u>Date Expended</u>	4 Name (Last, First): _____
2 <u>Amount</u> \$ 	5 Address: _____
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: _____
	7 Purpose of Expenditure: _____

1 <u>Date Expended</u>	4 Name (Last, First): _____
2 <u>Amount</u> \$ 	5 Address: _____
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: _____
	7 Purpose of Expenditure: _____

1 <u>Date Expended</u>	4 Name (Last, First): _____
2 <u>Amount</u> \$ 	5 Address: _____
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: _____
	7 Purpose of Expenditure: _____