

# **EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES**

## **SCHEDULE 1 B - G**

## **CANDIDATE COMMITTEE**

1.	Committee I.D. Number	

2. Committee Name

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS,

CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The -Vote activity in

Item 4f

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

Name and address of pers	son or vendor to whom the		ype of Activity	- II LIVIIZEL	,	5. Date	6. Amount
expenditure was made						5. Date	O. Amount
Expenditure #1		a.	Election Day Bus				
Name & Address:		b.	Slate Cards	C.	Challengers		
		d.	Poll Watchers	e.	Poll Workers		\$
		f.	Get-Out-The Vo	te Activity (	Specify):	Date	
For Activity Type b-f, check o	one:	_					
In-Kind	Independent						
If in support of, or in opposition to, a ballot proposal, check one:		Check box if this expenditure is payment of debt or obligation reported on previous statement					
Support	Oppose						
Statewide Proposal Name _		Loca	l Proposal Name _			Indicate County _	
Expenditure #2						•	
Name & Address:		a.	Election Day Bu	ising of Vot	ers To		
		The b.	Polls Slate Cards	c.	Challengers		
		d.	Poll Watchers	e.	Poll Workers	Date	\$
		f.	Get-Out-The Vot	te Activity (	Specify):		
For Activity Type b-f, check of	one:						
In-Kind	Independent						
If in support of, or in opposition	on to, a ballot proposal, check one:		Check box if this e				
Support	Oppose	deb	t or obligation repo	rted on pre	vious statement		
	Lo	ocal Pro	posal Name		Inc	licate County	
Expenditure #3 Name & Address:		a. Th	Election Day B	using of Vo	ters To		
		b.	Slate Cards	c. Chall	engers		
		d.	Poll Watchers	e. Poll	Workers	Date	\$
		f.	Get-Out-The Vo	ote Activity	(Specify):		
For Activity Type b-f, check one:							
In-Kind Independent  If in support of, or in opposition to, a ballot proposal, check one: Support Oppose		Check box if this expenditure is payment of debt or obligation reported on previous statement					
Statewide Proposal Name		Local P	roposal Name			Indicate County _	
						Subtotal this page	
Grand Total of all Schedules 1B-G)							
				(C	complete on last	page of Schedule	

Enter total on Line 8b Summary Page

Page \_\_\_\_\_ of \_\_\_\_

## CANDIDATE COMMITTEE FOR SCHEDULE 1B-G, GET OUT THE VOTE

### ITEM 3: NAME AND ADDRESS OF PERSON OR VENDOR TO WHOM THE

**EXPENDITURE WAS MADE:** Enter the name and address of each person paid for voter registration or get-out-the-vote activities. If other persons were paid by the person listed here, use Memo Itemizations to report their names, the dates the payments were made, and the amounts paid. Check the appropriate box (In-Kind, Independent, Support, Oppose) to indicate the nature of the expenditure.

**ITEM 4: TYPE OF ACTIVITY:** Check the appropriate box (Election Day Busing of Voters to the Polls, Slate Cards, Challengers, Poll Watchers, Poll Workers, Get-Out-the-Vote-Activity) to indicate the type of activity for which the expenditure was made. For get-out-the-vote activities (such as phone banks and voter registration expenditures) that do not have a check box listed on the form, specify the particular activity in the space provided.

**ITEM 5: DATE:** Enter the date on which the expenditure was made.

**ITEM 6: AMOUNT:** Enter the amount of the expenditure.