COMMITTEE SCHEDULE B—ALL OTHER FUNDS

		Amended:
Full Legal Name of Candidate (if applicable)	Full Name of Committee	
Ligenia (ue	C 9 DZ	
Type of Report	Reporting Period:	Number (if assigned)
Partial Quarter	8-51-20	

Date	Type of Other Funds	Description of Other Funds	Amount	Reporting Period Total	Aggregate Total
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Committee Schedule B Version 2015.1