



**2016—REPORT OF MEMBERSHIP ORGANIZATION OR CORPORATION COMMUNICATIONS**

**MEMBERSHIP ORGANIZATION OR CORPORATION**

Name: \_\_\_\_\_  
(Full name of member organization or corporation)

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

**INSTRUCTIONS:**

Any membership organization or corporation that makes a communication to its members or stockholders expressly advocating the election or defeat of a clearly identified candidate shall report any expenses related to such communications aggregating in excess of \$50 in any one candidate’s election race. These expenses are not “independent expenditures.” “Expressly advocate” and “clearly identified” are defined in Chapter 1, Section 8(2) of the Commission’s Rules (available on the Commission website). Reports may be faxed to the Commission, provided that the original is received within 5 days after the fax.

Filing Schedule for Reports of Membership Organization and Corporate Communication		
Report Name	Due Date	Reporting Period
<input type="checkbox"/> 42-Day Pre-Primary	May 3, 2016	January 1 — April 26
<input type="checkbox"/> 11-Day Pre-Primary	June 3, 2016	April 27 — May 31
<input type="checkbox"/> 42-Day Post-Primary	July 26, 2016	June 1 — July 19
<input type="checkbox"/> 42-Day Pre-General	September 27, 2016	July 20 — September 20
<input type="checkbox"/> 11-Day Pre-General	October 28, 2016	September 21 — October 25
<input type="checkbox"/> 42-Day Post-General	December 20, 2016	October 26 — December 13
<input type="checkbox"/> If this is an amendment to a filed report, check this box and indicate which report is being amended.		

**I CERTIFY THAT I HAVE EXAMINED THIS REPORT AND TO THE BEST OF MY KNOWLEDGE, IT IS TRUE, CORRECT AND COMPLETE.**

\_\_\_\_\_  
Signature of Authorized Officer of Employee

\_\_\_\_\_  
Date



**SCHEDULE B-2  
PAYMENTS AND OBLIGATIONS**

- Please indicate the date, payee, expense type and amount of each expense.
- If you are reporting an agreement or obligation to make a future payment, please check (✓) the box next to the expense type.

Expense Type				
LIT	Printing and Graphics (flyers, signs, palmcards, etc.)	PRT	Print media ads only (newspaper, magazine)	
MHS	Mail house (all services purchased)	RAD	Radio ads, production costs	
PHO	Phone banks, automated telephone calls	TVN	TV or cable ads, production costs	
POL	Polling and research survey	WEB	Website design, registration, hosting, maintenance	
POS	Postage for U.S. Mail and mail box fees	OTH	Other (include description)	
Date of Payment or Obligation	Payee, Address, Zip Code	Expense Type	✓	Amount
<b>A. Expenses for this page ⇒</b>				
<b>B. Total for all other Schedule B-2 pages (if any) ⇒</b>				
<b>C. Total expenses for this reporting period (A+B).</b> <i>This amount should equal the total amount for all candidates listed on Schedule B-1. ⇒</i>				