



DEPARTMENT OF INTERNAL REVENUE COMMISSION
STATEMENT OF DEBIT OR CREDIT FROM PAYMENTS MADE
IN THE PREVIOUS ELECTION

Name: _____ Date: _____
 Address: _____ City: _____
 Telephone: _____ State: _____
 Election Year: _____

1. Number of votes cast for _____	2. _____
3. Number of votes cast for _____	4. _____
5. Number of votes cast for _____	6. _____
7. Number of votes cast for _____	8. _____
9. Number of votes cast for _____	10. _____
11. Number of votes cast for _____	12. _____
13. Number of votes cast for _____	14. _____
15. Number of votes cast for _____	16. _____

NO.	NAME OF CANDIDATE	NO. OF VOTES	AMOUNT PAID	DATE OF PAYMENT
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____
6	_____	_____	_____	_____
7	_____	_____	_____	_____
8	_____	_____	_____	_____
9	_____	_____	_____	_____
10	_____	_____	_____	_____
11	_____	_____	_____	_____
12	_____	_____	_____	_____
13	_____	_____	_____	_____
14	_____	_____	_____	_____
15	_____	_____	_____	_____
16	_____	_____	_____	_____
17	_____	_____	_____	_____
18	_____	_____	_____	_____
19	_____	_____	_____	_____
20	_____	_____	_____	_____
21	_____	_____	_____	_____
22	_____	_____	_____	_____
23	_____	_____	_____	_____
24	_____	_____	_____	_____
25	_____	_____	_____	_____
26	_____	_____	_____	_____
27	_____	_____	_____	_____
28	_____	_____	_____	_____
29	_____	_____	_____	_____
30	_____	_____	_____	_____

TOTAL PAID: _____ TOTAL RECEIVED: _____

Signature: _____ Date: _____