

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

PAGE 10 OF 12

Name of Filing Committee or Candidate <u>Levinson for City Controller</u>	Reporting Period From <u>11/29/05</u> To <u>12/31/05</u>
--	---

			DATE	AMOUNT
Full Name of Contributor			MO. DAY YEAR	\$
Mailing Address			MO. DAY YEAR	\$
City	State	Zip Code (Plus 4)	MO. DAY YEAR	\$
Employer of Contributor			Occupation	
Employer Mailing Address/Principal Place of Business			Description of Contribution	
Full Name of Contributor			MO. DAY YEAR	\$
Mailing Address			MO. DAY YEAR	\$
City	State	Zip Code (Plus 4)	MO. DAY YEAR	\$
Employer of Contributor			Occupation	
Employer Mailing Address/Principal Place of Business			Description of Contribution	
Full Name of Contributor			MO. DAY YEAR	\$
Mailing Address			MO. DAY YEAR	\$
City	State	Zip Code (Plus 4)	MO. DAY YEAR	\$
Employer of Contributor			Occupation	
Employer Mailing Address/Principal Place of Business			Description of Contribution	
Full Name of Contributor			MO. DAY YEAR	\$
Mailing Address			MO. DAY YEAR	\$
City	State	Zip Code (Plus 4)	MO. DAY YEAR	\$
Employer of Contributor			Occupation	
Employer Mailing Address/Principal Place of Business			Description of Contribution	
Full Name of Contributor			MO. DAY YEAR	\$
Mailing Address			MO. DAY YEAR	\$
City	State	Zip Code (Plus 4)	MO. DAY YEAR	\$
Employer of Contributor			Occupation	
Employer Mailing Address/Principal Place of Business			Description of Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL
\$ <u>0</u>