



**RECEIVED**

By Lisa Anderson at 7:33 pm, Sep 29, 2020

## REPORT OF CONTRIBUTIONS AND EXPENDITURES

**Reports are due to the Town Clerk by 5pm on the scheduled reporting date with receipts.**

All contributions, contributions in kind, loans, and expenditures be reported on the forms provided by the Town Clerk.

### CANDIDATE OR COMMITTEE NAME:

Registered Agent: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Committee Type: \_\_\_\_\_ Candidate Committee Issue Committee

Name of Committee's Bank: \_\_\_\_\_

- Regularly Scheduled Filing
- Amended Filing. This amends previous report filed on \_\_\_\_\_
- Termination Report (Termination Reports **MUST** Have a Zero Balance)

**REPORTING PERIOD - Beginning Date:** \_\_\_\_\_ **Ending Date:** \_\_\_\_\_

BEGINNING BALANCE	\$ _____	<b>Totals must match attached detailed reports.</b>
Contributions (+)	\$ _____	
Contributions In Kind (+)	\$ _____	
Loans (+)	\$ _____	
Expenditures/Expenditures In-Kind (-)	\$ _____	
ENDING BALANCE	\$ _____	

**I hereby certify that to the best of my knowledge and belief all contributions received and all expenditures made during this reporting period are accurately reflected in this report.**

Registered Agent's Name: \_\_\_\_\_

Registered Agent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*If Applicable*

Candidate Name: \_\_\_\_\_

Candidates Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Detailed Report of CONTRIBUTIONS

(For funds spent by the Candidate, list as a Contribution and also list amount under Expenditure)

Name of Committee: \_\_\_\_\_

<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> \$ _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____

## Detailed Report of EXPENDITURES

(Also list In-Kind Contributions, money spent by the Candidate, bank and electronic payment fees, etc.)

Name of Committee: \_\_\_\_\_

<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____ _____
<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____ _____
<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____ _____
<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____ _____

**~ATTACH RECEIPTS FOR EXPENDITURES OVER \$100~**

# Detailed Report of CONTRIBUTIONS IN KIND

(Record Value of an In-Kind Contributions under Expenditures)

Name of Committee: \_\_\_\_\_

<u>Date Accepted:</u> _____  Estimated Value:  \$ _____	FROM: _____ Address: _____ City/State/Zip: _____ Nature of Contribution: _____ _____
<u>Date Accepted:</u> _____  Estimated Value:  \$ _____	FROM: _____ Address: _____ City/State/Zip: _____ Nature of Contribution: _____ _____
<u>Date Accepted:</u> _____  Estimated Value:  \$ _____	FROM: _____ Address: _____ City/State/Zip: _____ Nature of Contribution: _____ _____
<u>Date Accepted:</u> _____  Estimated Value:  \$ _____	FROM: _____ Address: _____ City/State/Zip: _____ Nature of Contribution: _____ _____

# Detailed Report of LOANS

Name of Committee: \_\_\_\_\_

<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____
<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____
<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____
<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____
<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____