



RECEIVED
By Lisa Anderson at 11:00 am, Oct 30, 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:

Table with 3 columns: Description, Amount, and Notes. Rows include BEGINNING BALANCE, Contributions (+), Contributions In Kind (+), Loans (+), Expenditures/Expenditures In-Kind (-), and ENDING BALANCE. A red note states 'Totals must match attached detailed reports.'

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: [Signature] Date:

If Applicable

Candidate Name:

Candidates Signature: [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: _____