★ VIRGINIA ★
DEPARTMENT *of* ELECTIONS

Campaign Finance Report
FOR
Referendum Committees

2014 Reporting Year

☐ Check here if this is an **Amended Report Number:** **SBE Committee ID Number:**

NAME OF REFERENDUM COMMITTEE

DATE OF REFERENDUM

MAILING ADDRESS (INCLUDE NUMBER AND STREET):

CITY, STATE AND ZIP CODE

EMAIL / DAYTIME TELEPHONE NUMBER (*for person preparing this report*)

NO ACTIVITY STATEMENT

☐ I declare, subject to the penalties of Virginia's campaign finance law, that except for the addition of interest or dividend payments and/or subtraction of any bank service charges, no monies or other things of value have been received and no monies have been expended for this reporting cycle; any interest or dividend payments and/or subtraction of bank service charges will be reported on the appropriate schedule of the next report for any period in which other activity occurs. The balance, as indicated on Line 19 of Schedule H, for the last reporting period with activity was:

$_____

REPORT DATE [CHECK ONE SQUARE BELOW]

MAY ELECTION

Referendum Committees who will have activity pertaining to the **2014 May** General Elections have reports due on the following dates:

- ☐ APRIL 15, 2014
- ☐ APRIL 29, 2014
- ☐ JUNE 17, 2014
- ☐ JULY 15, 2014
- ☐ JANUARY 15, 2015

NOVEMBER ELECTION

Referendum Committees who have activity pertaining to the **2014 June Primaries and/or November** General elections have reports due on the following dates:

- ☐ APRIL 15, 2014
- ☐ JUNE 2, 2014
- ☐ JULY 15, 2014
- ☐ SEPTEMBER 15, 2014
- ☐ OCTOBER 15, 2014
- ☐ OCTOBER 27, 2014
- ☐ DECEMBER 4, 2014
- ☐ JANUARY 15, 2015

SPECIAL REFERENDUM

Referendum Committees who will have activity in support or opposition to a referendum to be held on any day other than a May or November General Election shall file reports on the following dates (filing schedules will be provided as necessary):

- ☐ PRE-ELECTION
- ☐ POST-ELECTION*

STATEMENT OF TREASURER OR CUSTODIAN OF THE BOOKS

I declare, subject to the provisions of § 24.2-1016 which is punishable up to a Class 5 Felony, that this report for the period through _____, including all its accompanying schedules, is to the best of my knowledge and belief true, correct and complete.

SIGNATURE OF TREASURER OR CUSTODIAN OF THE BOOKS

DATE

* **Final Report Requirement**: Referendum Committees have six months from the date the referendum is decided to file a final report or to amend their Statement of Organization to become a Political Action Committee and file on the appropriate schedule.

Instructions for Completing this Form

Cover Sheet for Referendum Committee Campaign Finance Reports

This form must be completed and attached to all reports whenever:

- any item of value is received and/or when money is spent, this form must be filed along with Schedules G and H and any other Schedules required by items reported thereon;

OR

- if nothing of value, other than interest or dividends has been received and, except for payment of bank service charges, no monies are spent during the reporting period, file this form by only checking the **"No Activity"** box. In this case, report in the space indicated, the "same balance" as that stated on line 19 of Schedule H in your last report until you file a report for any period in which other activity has occurred. In the meantime, accurate record keeping is essential.

REQUIRED INFORMATION

Amended Filing: If this filing is amending a previously filed report, please indicate here by checking the box and filling in the number of times the report has been amended (e.g. if this is the first time the report has been amended you would write 1). Only the cover sheet and the schedules affected by the amended filing are required when filing an amended report.

SBE Committee ID Number: The Committee ID# provided by SBE.

Name: List the full name of the referendum committee.

Date of Referendum: Enter the month, day and year on which the referendum will be decided.

Mailing Address: List the complete mailing address of the referendum committee (the same way it appears on the *Statement of Organization for a Candidate* form).

Email / Daytime Telephone Number: List the email and/or daytime telephone number of the person that prepared this report. If an email address is given, all subsequent communication from the State Board will be done via email.

No Activity Statement: If nothing of value, other than interest or dividends has been received and, except for payment of bank service charges, no monies were spent during the reporting period, check this box. List in the space indicated, the "ending balance" as it is stated on Line 19 of Schedule H of the last report filed.

Report Date: Indicate here by checking the due date of the report which you are filing.

Reporting Period: List the activity begin date and activity end date for which the report being filed covers.

Signature: The treasurer of the referendum committee must sign this report indicating that it is correct and complete.

Date Report Completed: Read the statement, sign and date the form.

Where to file Campaign Finance reports:

- **ALL Referendum Committees** that file **electronically** must file with the State Board of Elections only. *Electronic filers must file by 11:59 pm on the report's due date.*
- **Referendum Committees** that file paper reports: The original must be mailed and postmarked on or before the report's due date.

Department of Elections
Washington Building
1100 Bank Street, First Floor
Richmond, VA 23219-3642

SCHEDULE A: DIRECT CONTRIBUTIONS OVER $100

MUST BE TYPED OR PRINTED LEGIBLY IN INK

REPORTING PERIOD: _____ **THROUGH:** _____

PAGE: _____ **OF:** _____

_____

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

COLUMN 1 FULL NAME OF CONTRIBUTOR MAILING ADDRESS OF CONTRIBUTOR & ZIP [LIST IN ALPHABETICAL ORDER]	COLUMN 2 BUSINESS/CORPORATE DONOR 1. NOT REQUIRED 2. TYPE OF BUSINESS 3. PRINCIPAL PLACE OF BUSINESS INDIVIDUAL DONOR 1. EMPLOYER OR BUSINESS 2. OCCUPATION 3. PRINCIPAL PLACE OF BUSINESS	COLUMN 3 DATE RECEIVED	COLUMN 4 CONTRIBUTION THIS PERIOD	COLUMN 5 AGGREGATE TO DATE
	1. 2. 3.			
	1. 2. 3.			
	1. 2. 3.			
	1. 2. 3.			
	1. 2. 3.			
	1. 2. 3.			
	1. 2. 3.			
FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.	**TOTAL THIS PERIOD** [ENTER ON **LAST PAGE** OF SCHEDULE A **AND** ON **LINE 1** OF SCHEDULE G.]			

Instructions for Completing this Form

Schedule A: Direct Contributions over $100

This schedule is to be used when reporting monetary contributions from persons, organizations and other entities received by the candidate or committee.

Itemization of a contribution is required if:

- the contribution is more than $100; or
- the contributor has given previously to the committee and the contributor's total contribution (aggregate) in this election cycle (the current reporting year if you are a committee) is more than $100.

REQUIRED INFORMATION

Page Count: List the page number and the total number of Schedule A's being included with the report which you are filing. (e.g. Page 2 of 4)

Column 1: List the full name and complete mailing address of the contributor (this list must be maintained in alphabetical order).

Column 2: If the contributor is an individual, list the contributor's employer or business, occupation and the principal place of business (city, state and zip code) where the contributor works. If the contributor is a business or corporate donor, list the type of business of the contributor and the principal place of business (city, state and zip code) where the business is located.

Column 3: List the date that the contribution was received by the candidate or committee [the date entered should be the date that the check was actually received by the committee.]

Column 4: List the amount of the contribution being given during this reporting period.

Column 5: Enter the aggregate contribution. [For a candidate, the aggregate is the total amount of the contribution from the beginning of the election cycle. Political committees will aggregate contributions from the beginning of the current reporting year.] The aggregate includes both monetary and In-Kind [reported on Schedule B] contributions.

Total This Period: Add the total amount of contributions shown in Column 4 on the last page of Schedule A. This number should then be transferred to Line 1 of Schedule G.

Other Contribution Reminders

§ Once a contributor has been itemized on this schedule, all subsequent monies from that contributor, regardless of the amount, must be reported on all future reports for the election cycle (current reporting year for political committees.)

§ Do not list any contributors who were itemized on previous reports but who have not donated to the candidate or committee during the current reporting period.

§ Do not combine contributions of an individual and a related business or organization. Treat each entity as a separate contributor and track the aggregates accordingly.

§ All listed contributions must appear in alphabetical order. Use the last name for individuals and the first letter of the business or corporate name (not including articles such as "THE") when alphabetizing. There is no need to separate corporations, political committees, individuals, or other entities onto separate schedules; submit one alphabetized list for all itemized contributions.

§ For checks drawn on a joint account, enter the name of the person signing the check as the contributor, unless a letter stating otherwise accompanies the check. In this case, both account holders must sign the letter.

SCHEDULE B: IN-KIND CONTRIBUTIONS OVER $100

REPORTING PERIOD: _____ THROUGH: _____

MUST BE TYPED OR PRINTED LEGIBLY IN INK

PAGE: _____ OF _____

_____

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

COLUMN 1 FULL NAME OF CONTRIBUTOR MAILING ADDRESS OF CONTRIBUTOR & ZIP [LIST IN ALPHABETICAL ORDER]	COLUMN 2 DONOR INFORMATION 1. EMPLOYER OR BUSINESS (NOT REQUIRED IF CORPORATE/COMPANY DONOR) 2. OCCUPATION (CORPORATE CONTRIBUTION – ENTER TYPE OF BUSINESS) 3. PRINCIPAL PLACE OF BUSINESS 4 SERVICE/GOODS RECEIVED 5 BASIS USED TO DETERMINE VALUE	COLUMN 3 DATE RECEIVED	COLUMN 4 CONTRIBUTION THIS PERIOD	COLUMN 5 AGGREGATE TO DATE
	1.			
	2.			
	3.			
	4.			
	5.			
	1.			
	2.			
	3.			
	4.			
	5.			
	1.			
	2.			
	3.			
	4.			
	5.			
FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.		TOTAL THIS PERIOD [ENTER ON **LAST PAGE** OF SCHEDULE B **AND** ON **LINES 2 AND 7** OF SCHEDULE G.]		

Instructions for Completing this Form

Schedule B: In-kind Contributions over $100

This schedule is to be used when reporting "In-Kind" contributions, received by the candidate or committee from persons, organizations and other entities.

In-Kind Contributions – An In-Kind Contribution is the donation of goods, services, property or anything else of value that is offered for free or less than the usual and normal charge; or payments by a third party for goods and services rather than money.

Note: The basis for arriving at the dollar value of an in-kind gift is: new items are valued at retail value; used items are valued at fair market value and services rendered are valued at the actual cost of service per hour.

Itemization is required if:

- the contribution is more than $100; or
- the contributor has given previously to the committee and the contributor's total contribution (aggregate) in this election cycle (the current reporting year if you are a committee) is more than $100.

REQUIRED INFORMATION

Page Count: List the page number and the total number of Schedule B's being included with the report which you are filing. (e.g. Page 2 of 4)

Column 1: List the full name and complete mailing address (include zip code) of the contributor (this list must be maintained in alphabetical order).

Column 2:
Individual Contributions - list the contributor's employer or business; the contributor's occupation and the principal place of business (city and state) where the contributor works; a description of the service or item that was contributed; and the basis used for determining the value of the service or item.

Business/Corporate Contributions - list the type of business of the contributor and the principal place of business (city, state and zip code) where the contributor is located; a description of the service or item that was contributed; and the basis used for determining the value of the service or item.

Column 3: Enter the date that the In-Kind contribution was received, **NOT** the date that payment for the service was made or the date that the contributor informed the committee of the amount of the service (e.g. if a mailer is sent out on the candidate's behalf, the date should reflect the day that the mailer was mailed to the public.)

Column 4: List the amount of the contribution being given during this reporting period.

Column 5: List the total contributions for this election cycle (this year for committees) that the contributor has given to the candidate or committee. The aggregate for a contributor includes both monetary and In-Kind (reported on Schedule B) contributions.

Total This Period: Add the total amount of In-Kind contributions shown in Column 4 and if more than one page is needed, list the amount on the last page of Schedule B.

Other In-Kind Contribution Reminders

§ Once a contributor has been itemized on this schedule, all subsequent monies from that contributor, regardless of the amount, must be reported on all future reports for the election cycle (current reporting year for political committees.)

§ Do not list any contributors who were itemized on previous reports but who have not donated to the candidate or committee during the current reporting period.

§ Do not combine contributions of an individual and a related business or organization. Treat each entity as a separate contributor and track the aggregates accordingly.

§ All listed contributions must appear in alphabetical order. Use the last name for individuals and the first letter of the business or corporate name (not including articles such as "THE") when alphabetizing. There is no need to separate corporations, political committees, individuals, or other entities onto separate schedules; submit one alphabetized list for all itemized contributors.

SCHEDULE C:

BANK INTEREST, REFUNDED EXPENDITURES AND REBATES

REPORTING PERIOD: _____ THROUGH: _____

MUST BE TYPED OR PRINTED LEGIBLY IN INK

PAGE: _____ OF: _____

_____

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

COLUMN 1 FULL NAME AND ADDRESS OF PAYER [LIST IN ALPHABETICAL ORDER]	COLUMN 2 REASON/TYPE OF PAYMENT	COLUMN 3 DATE RECEIVED	COLUMN 4 PAYMENT AMOUNT

FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.

TOTAL THIS PERIOD
[ENTER ON **LAST PAGE** OF SCHEDULE C **AND** ON **LINE 6** OF SCHEDULE G.]

Instructions for Completing this Form

Schedule C: Bank Interest, Refunded Expenditures and Rebate

Use this Schedule when reporting all other miscellaneous receipts of refunds, rebates, interest paid and profits on investments made to the campaign or committee.

REQUIRED INFORMATION

Page Count: List the page number and the total number of Schedule C's being included with the report which you are filing. (e.g. Page 2 of 4)

Column 1: List the full name and complete mailing address of the payer.

Column 2: List the reason/type of payment (e.g. telephone refund)

Column 3: List the date that the payment was received by the candidate.

Column 4: List the amount of the payment received.

SCHEDULE D: EXPENDITURES

MUST BE TYPED OR PRINTED LEGIBLY IN INK

***DO **NOT** INCLUDE REPAYMENT OF LOAN PRINCIPAL **OR** DISPOSITION OF FINAL SURPLUS FUNDS ON THIS SCHEDULE

REPORTING PERIOD: _____ **THROUGH:** _____

PAGE: _____ **OF** _____

_____

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

COLUMN 1 PERSON OR COMPANY PAID MAILING ADDRESS OF PAYEE INCLUDE ZIP	**COLUMN 2** ITEM OR SERVICE	**COLUMN 3** NAME OF PERSON AUTHORIZING EXPENDITURE	**COLUMN 4** DATE OF EXPENDITURE	**COLUMN 5** AMOUNT PAID

FILER IS SUBJECT TO PENALTIES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.

TOTAL THIS PERIOD
[ENTER ON **LAST PAGE** OF SCHEDULE D **AND** ON **LINE 9** OF SCHEDULE G.]

Instructions for Completing this Form
Schedule D: Expenditures

This schedule is to be used when reporting disbursements of Committee funds.

REQUIRED INFORMATION

Page Count: Report the page number and the total number of Schedule D's being included with the report that you are filing (e.g. Page 2 of 4).

Column 1: Report the full name of person or company paid and the complete mailing address of payee (including zip).

Column 2: Report the description of the item or service purchased.

Column 3: Report the name of the individual who authorized the expenditure.

Column 4: Report the date the expense was incurred.

Column 5: Report the amount of the expenditure.

Total This Period: Add the total amount of expenditures shown in Column 6; and if more than one page is needed, report the amount on the last page of Schedule D.

Other Expenditure Reminders

- Expenditures should be listed in chronological order.
- The item or service purchased must be described in sufficient detail to inform the reader of the purpose of the expenditure (e.g. fund-raising expense, travel, payroll, printing and mailing).
- Avoid vague or incomplete descriptions such as "expenses."
- Credit Card payments must be itemized.

SCHEDULE E: LOANS

MUST BE TYPED OR PRINTED LEGIBLY IN INK

REPORTING PERIOD: _____ **THROUGH:** _____

PAGE _____ **OF** _____

_____

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

PART I: ITEMIZATION OF LOANS RECEIVED

COLUMN 1 FULL NAME OF LENDER ADDRESS OF LENDER (INCLUDE ZIP CODE) [**LIST IN ALPHABETICAL ORDER**]	**COLUMN 2** FULL NAME OF CO-BORROWER, GUARANTOR OR ENDORSER ADDRESS (INCLUDE ZIP CODE)	**COLUMN 3** DATE RECEIVED	**COLUMN 4** AMOUNT OF LOAN THIS PERIOD	**COLUMN 5** REMAINING LOAN BALANCE
	TOTAL THIS PERIOD [ENTER ON **LAST PAGE** OF SCHEDULE E, PART I **AND** ON **LINE 12** OF SCHEDULE G]			

PART II: ITEMIZATION OF LOANS REPAID

COLUMN 1 FULL NAME OF LENDER ADDRESS OF LENDER (INCLUDE ZIP CODE) [**LIST IN ALPHABETICAL ORDER**]	**COLUMN 2** FULL NAME OF CO-BORROWER, GUARANTOR OR ENDORSER ADDRESS (INCLUDE ZIP CODE)	**COLUMN 3** DATE REPAID	**COLUMN 4** AMOUNT REPAID THIS PERIOD	**COLUMN 5** REMAINING LOAN BALANCE
FILER IS SUBJECT TO PENALTIES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.	**TOTAL THIS PERIOD** [ENTER ON **LAST PAGE** OF SCHEDULE E, PART I **AND** ON **LINE 14** OF SCHEDULE G]			

Instructions for Completing this Form

Schedule E: Loans

This schedule is to be used when reporting any loans received or repaid.

LOAN - includes any money paid to the candidate or committee that the lender expects to be repaid. A loan may be made by any entity.

REQUIRED INFORMATION (GENERAL)

Page Count: List the page number and the total number of Schedule E's being included with the report which you are filing. (e.g. Page 2 of 4)

REQUIRED INFORMATION (PART I)

Column 1: List the full name of the person or company giving the loan and the complete mailing address (including zip code.)

Column 2: If one, list the full name of the co-borrower, guarantor or endorser of the loan and their complete mailing address (including zip code.)

Column 3: List the date that the loan was received by the candidate or committee.

Column 4: List the amount of the loan being given during this reporting period.

Column 5: List the remaining loan balance that the candidate or committee has to repay.

Total This Period: Add the total amount of loans shown in Column 4; and if more than one schedule is needed, list the amount on the last page of the Schedule E, Part I.

REQUIRED INFORMATION (PART II)

Column 1: List the full name of the person or company giving the loan and the complete mailing address (including zip code.)

Column 2: If one, list the full name of the co-borrower, guarantor or endorser of the loan and their complete mailing address (including zip code.)

Column 3: List the date that the loan or a portion of the loan was repaid by the candidate or committee.

Column 4: List the amount of the loan that is being repaid during this reporting period.

Column 5: List the remaining loan balance that the candidate or committee has to repay.

Total This Period: Add the total amount of loans shown in Column 4; and if more than one schedule is needed, list the amount on the last page of Schedule E, Part II.

SCHEDULE F:

REPORTING PERIOD: _____ THROUGH: _____

DEBTS REMAINING UNPAID AS OF THIS REPORT

MUST BE TYPED OR PRINTED LEGIBLY IN INK

PAGE: _____ OF _____

Include all contracts, credit purchases and loans payable.

_____

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

COLUMN 1 FULL NAME OF CREDITOR MAILING ADDRESS OF CREDITOR INCLUDE ZIP	COLUMN 2 PURPOSE OF OBLIGATION	COLUMN 3 DATE DEBT INCURRED	COLUMN 4 AMOUNT REMAINING UNPAID

FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.

TOTAL THIS PERIOD
[ENTER ON **LAST PAGE** OF SCHEDULE F **AND** ON **LINE 20** OF SCHEDULE H.]

Instructions for Completing this Form

Schedule F: Debts Remaining Unpaid as of this Report

This schedule is to be used when listing any debt that is outstanding
as of the close of the reporting period.

Debt - includes loans payable, services or goods contracted by the committee for which payment has not been made (i.e., credit purchases), and any other contract or financial obligation of the campaign.

REQUIRED INFORMATION

Page Count: List the page number and the total number of Schedule F's being included with the report which you are filing (e.g. Page 2 of 4).

Column 1: List the full name and address (including zip code) of the creditor that the candidate or committee owes.

Column 2: Describe the nature or reason for this obligation (e.g. office products).

Column 3: List the date that this debt was incurred.

Column 4: List the amount of the debt that remains unpaid.

SCHEDULE G: STATEMENT OF FUNDS

MUST BE TYPED OR PRINTED LEGIBLY IN INK

FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.

REPORT PERIOD FROM _____ THROUGH _____ .

_____

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE, OR POLITICAL COMMITTEE

*Please Enter Zero on Lines with No Activity

CONTRIBUTIONS RECEIVED THIS PERIOD

		Number of Contributions	Amount	
1.	Schedule A [Over $100]	#_____	$_____	
2.	Schedule B [Over $100]	#_____	$_____	
3.	Un-itemized cash contributions [$100 or less]	#_____	$_____	
4.	Un-itemized In-Kind Contributions [$100 or less]	#_____	$_____	
5.	**TOTAL** [Add Lines 1, 2, 3 & 4]	**#_____**		**$_____**

BANK INTEREST, REFUNDED EXPENDITURES AND REBATES

6.	Schedule C [also enter on Line 17b on Schedule H]		**$_____**

EXPENDITURES MADE THIS PERIOD

7.	Schedule B [From line 2 Above]	$_____	
8.	Un-itemized In-Kind contributions [From line 4 Above]	$_____	
9.	Schedule D [Expenditures]	$_____	
10.	**TOTAL** [add lines 7, 8 and 9]		**$_____**

RECONCILIATION OF LOAN ACCOUNT

11.	Beginning loan balance [from Line 15 of last report]	$_____	
12.	Loans received this period [from Schedule E - Part I]	$_____	
13.	**SUBTOTAL** [Add Lines 11 and 12]		**$_____**
14.	**Subtract**: Loans repaid this period [from Schedule E - Part II]	($_____)	
15.	Ending loan balance [subtract Line 14 from Line 13]		**$_____**

Instructions for Completing this Form

Schedule G: Monetary Contributions over $100

This schedule is a statement of the information on contributions, receipts, expenditures and loan transactions for the reporting period.

REQUIRED INFORMATION

Line 1: Enter the total number of contributors itemized on Schedule A, and the total dollar amount of itemized contributions received this period [the amount shown at bottom of the last page of *Schedule A*].

Line 2: Enter the total number of In-Kind contributors itemized on Schedule B and the total dollar amount of itemized In-Kind contributions received this period [the amount shown at bottom of the last page of *Schedule B*].

Line 3: Enter total number of contributors and the total dollar amount of contributions received this period from contributors who gave monetary contributions $100 or less and whose contribution this election cycle (the current reporting year for political committees) is less than $100.

Line 4: Enter total number of In-Kind contributors and the total dollar amount of In-Kind contributions received this period for contributors who gave In-Kind contributions $100 or less and that contributor's aggregate contribution this election cycle (the current reporting year for political committees) is less than $100.

Line 5: Add lines 1, 2, 3 and 4 - enter total.

Line 6: Enter total of other receipts [the amount shown at bottom of the last page of *Schedule C*].

Line 7: Enter the amount from Line 2.

Line 8: Enter the amount from Line 4.

Line 9: Enter the total amount of expenditures [shown at the bottom of the last page of Schedule D.]

Line 10: Add lines 7, 8 and 9 - enter total.

Line 11: Enter amount listed on line 15 of last report.

Line 12: Enter total loans received this period [the amount shown at bottom of part I of *Schedule E*].

Line 13: Add lines 11 and 12 - enter subtotal.

Line 14: Enter total loans repaid this period [the amount shown at bottom of part II of *Schedule E*].

Line 15: Subtract line14 from line 13 – enter difference.

SCHEDULE H: SUMMARY OF RECEIPTS AND DISBURSEMENTS

MUST BE TYPED OR PRINTED LEGIBLY IN INK

FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.

REPORT PERIOD FROM _____ THROUGH _____ .

_____

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE, OR POLITICAL COMMITTEE

*Please Enter Zero On Lines with No Activity

16. **Beginning Balance** [Line 19 of last report] $_____

17. **Receipts for Current Reporting Period:**

    a. Contributions received this period [Line 5 of Schedule G] $_____

    b. Bank interest, refunded expenditures and rebates [Line 6 of Schedule G] $_____

    c. Loans received this period [Line 12 of Schedule G] $_____

    d. **Subtotal**: Contributions and Receipts received this period [Add Lines 17a, 17b and 17c above] $_____

    e. **Total Expendable Funds** [Add Lines 16 and 17d] **$_____**

18. **Disbursements for Current Reporting Period:**

    a. Expenditures made this reporting period [Line 10 of Schedule G] $_____

    b. Loans repaid this reporting period [Line 14 of Schedule G] $_____

    c. Other surplus funds paid out [from Schedule I] $_____

    d. Total Payments Made [Add lines 18a,18b, and 18c] **$_____**

19. **Ending Balance** [Subtract Line 18d from Line 17e] **$_____**
    (MUST MATCH LINE 29)

20. Total Unpaid Debts [from Schedule F of this report] $_____

Committee's Receipts and Disbursements – Election Cycle Totals

21. Balance at Start of Election Cycle $_____

22. Previous Receipts [Line 24 from last report] $_____
    (ENTER ZERO IF FIRST REPORT OF ELECTION CYCLE)

23. Receipts from Current Reporting Period [Line 17d above] $_____

24. Total Receipts this Election Cycle [Add lines 22 and 23] $_____

25. Total Funds Available [Add lines 21 and 24] **$_____**

26. Previous Disbursements [Line 28 from last report] $_____
    (ENTER ZERO IF FIRST REPORT OF ELECTION CYCLE)

27. Disbursements from Current Reporting Period [Line 18d above] $_____

28. Total Disbursements this Election Cycle[Add lines 26 and 27] **$_____**

29. **Ending Balance** [Subtract Line 28 from Line 25 - **Difference must match Line 19**] **$_____**

Instructions for Completing this Form

Schedule H: Summary of Receipts and Disbursements

This schedule contains a summary of the total of contributions, receipts, expenditures of the current election cycle (current reporting year for committees).

REQUIRED INFORMATION

Line 16: List the beginning balance [the amount shown on line 19 of the last filed report]. If this is the first report the campaign or committee has filed, this amount will be zero. If this is the first report of the Election Cycle (current reporting year for committees) the amount will be taken from the ending balance [line 19] of the last report filed.

Line 17:

a. List total contributions received this period [the amount shown on line 5 of *Schedule G* of this report].
b. List total rebates, refunds, interest and other miscellaneous income [the amount shown on Line 6 of *Schedule G* of this report].
c. List total loans received this period [the amount shown on line 12 of *Schedule G* of this report].
d. Add lines 17a, 17b and 17c of this schedule – enter total.
e. Add lines 16 and 17d of this schedule – enter total.

Line 18:

a. List total expenditures made this period [the amount shown on line 10 of *Schedule G* of this report].
b. List total loans repaid this period [the amount shown on line 14 of *Schedule G* of this report].
c. List other surplus funds being paid out [the amount shown at the bottom of the last page of *Schedule I*].
d. Add lines 18a, 18b, and 18c - enter total.

Line 19: Subtract line 18d from line 17e - enter difference. **This Difference Must Match Line 29.**

Line 20: Enter total of all unpaid debts [the amount shown at the bottom of Schedule F of this report.]

Line 21: Enter balance at start of Election Cycle:
Candidates – A candidate's election cycle begins on January 1 of the year immediately following the election for the office and ends on December 31 the year of the election for the office. New candidates' will enter zero.
Political Committees – Enter balance at start of this calendar year.

Line 22: List total receipts from last report [enter amount shown on line 24 from last report.] Amount will be **ZERO** if this is the first report of the election cycle (first report of calendar year for committees.)

Line 23: List receipts from current reporting period [enter amount on line 17d of this report.]

Line 24: Add lines 22 and 23 – enter total.

Line 25: Add lines 21 and 24 – enter total.

Line 26: Enter previous disbursement totals [the amount shown on line 28 of last report.] Amount will be **ZERO** if this is the first report of the election cycle (first report of calendar year for committees.)

Line 27: Enter total disbursements from current reporting period [the amount shown on line 18d of this report.]

Line 28: Add lines 26 and 27 – enter total.

Line 29: Subtract line 28 from line 25 – enter the difference. **THIS DIFFERENCE MUST MATCH LINE 19.**

SCHEDULE I: FINAL SURPLUS FUNDS PAID OUT

REPORTING PERIOD: _____ THROUGH: _____

MUST BE TYPED OR PRINTED LEGIBLY IN INK

PAGE _____ OF _____

USE THIS SCHEDULE ONLY WHEN FILING A FINAL

_____

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

COLUMN 1 PERSON OR COMPANY PAID	COLUMN 2 MAILING ADDRESS OF PAYEE INCLUDE ZIP	COLUMN 3 TYPE OF DISPOSITION	COLUMN 4 NAME OF PERSON AUTHORIZING EXPENDITURE	COLUMN 5 DATE OF EXPENDITURE	COLUMN 6 AMOUNT PAID

FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN .

TOTAL THIS PERIOD

[ENTER ON **LAST PAGE** OF SCHEDULE I **AND** ON **LINE 18D** OF SCHEDULE H.]

Instructions for Completing this Form

Schedule I: Final Surplus Funds Paid Out

This schedule is to be used when reporting the disbursement of surplus funds. It should be included **only** when filing a Final report.

REQUIRED INFORMATION

Page Count: List the page number and the total number of Schedule I's being included with the report which you are filing (e.g. Page 2 of 4)

Column 1: List the full name of person or company paid.

Column 2: List the complete mailing address of payee (including zip).

Column 3: List the description of the disposition of funds (e.g. returning contribution).

Column 4: List the name of the individual who authorized the surplus payment.

Column 5: List the date the surplus was paid.

Column 6: List the amount of surplus paid.

Total This Period: Add the total amount of surplus expenditures shown in Column 6; and if more than one page is needed, list the amount on the last page of Schedule I.