

Campaign Finance and Public Disclosure Board



Suite 190 . Centennial Office Building . 658 Cedar Street . St. Paul MN 55155-1603 . www.cfboard.state.mn.us
Email at: cfb.reports@state.mn.us.

Generic Report of Receipts and Expenditures for Political Committees and Political Funds Period Covered: January 1 through _____

FILING INSTRUCTIONS

- This report may be emailed to cf.board@state.mn.us or faxed to 651-539-1196 or (800) 357-4114
- All information on this report is public information and may be published on the Board's website at www.cfboard.state.mn.us
- It is unlawful to use this information for commercial purposes.
- Board staff may be reached by phone at (651) 539-1180 or (800) 657-3889 or by email at cf.board@state.mn.us

COMMITTEE OR FUND INFORMATION

Committee or fund name	Registration number
Treasurer name	Treasurer email address
Treasurer address	
Treasurer city, state, zip	Treasurer telephone (daytime)

REPORT OPTIONS

Check one of the boxes below *only if applicable* and provide the requested information.

- No change statement** Check this box only if your committee received *no* contributions and made *no* expenditures since your last reporting period. Do not use this statement if there was any monetary change. If there was no change:
- Provide the current cash balance: \$ _____, and sign here
- _____
I, the treasurer or deputy treasurer (check one) Date _____
certify there has been no change and that this report is complete, true and correct.
- Amendment** Check this box if your committee or fund is filing this report to amend a previously filed report for this period.
- Provide date of the report being amended: _____
- Termination** Check this box if your committee has dissolved. A committee may not dissolve unless it has settled all its debts and disposed of all its assets in excess of \$100.

This document is available in alternative formats to individuals with disabilities by calling 651-539-1180; 800-657-3889; or through the Minnesota Relay Service at 800-627-3529.

For office use only		
<input type="checkbox"/> Checked in	<input type="checkbox"/> Scanned	<input type="checkbox"/> Data entered

COMMITTEE TRANSACTION INSTRUCTIONS

- Line 1** Beginning cash balance must be the same as the prior year ending cash balance. Beginning cash balances include money on deposit in banks and other depositories including checks, negotiable instruments and other paper commonly accepted by a bank as a deposit.
- Line 2** Contributions received by your committee.
- Line 3** Receipts from an individual, financial institution, or other entity received as a loan during this reporting period.
- Line 4** Income received by your committee that is not a contribution or loan (i.e., interest from an interest bearing account, repayment of a loan made by your committee to an individual or other entity).
- Line 6** All expenditures made by your committee that do not fall within any other category listed, including committee operating costs and contributions given to federal and local candidates.
- Line 7** All expenditures made by your committee made to promote or defeat a *state ballot question* (constitutional amendment). **Expenditures for local referendums should be reported as campaign expenditures.**
- Line 8** Cash or in-kind contributions given by your committee to state legislative or constitutional candidate committees.
- Line 9** Cash or in-kind contributions given by your committee to other political party units.
- Line 10** Cash or in-kind contributions given by your committee to political committees or political funds.
- Line 11** Independent expenditures made on behalf of a *state legislative or constitutional office candidate* without the expressed or implied consent, authorization, cooperation of, or at the request or suggestion of the candidate, candidate's treasurer, or candidate's agent. ***If your committee made independent expenditures, you must sign and have notarized the Affidavit of Independent Expenditures on page 18.***
- Line 13** Ending cash balance. Reported ending cash balance must be reconcilable with balance stated by committee depositories.

NOTES AND LOANS INSTRUCTIONS

- Line 14** Report the total of all loans owed *by* your committee as of December 31st, including all previous years, and,
- Line 15** Report all unpaid bills *owed by* your committee as of December 31st, including all previous years

CERTIFICATION

This report must be signed and dated by the current treasurer or deputy treasurer of record. The original signature of the person responsible for preparation or filing of this report is required to make the report complete. Only signed reports may be filed with the Board.

A document filed by facsimile transmission meets this requirement if the original document being transmitted bears the required signature.

COMMITTEE TRANSACTION SUMMARY

1	Beginning cash balance 1/1/___ (should be the same as the 12/31/___ ending cash balance)	\$
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A RECEIPTS: Cash (Col. 1) Blank (Col. 2) In-kind (Col. 3) Total (Col. 4)

2	Total contributions received	Sch. A1 - CR	\$		\$	\$
3	Receipts from loans payable	Sch. A2 - LP	\$			\$
4	Miscellaneous income	Sch. A2 - MISC	\$			\$
5	TOTAL RECEIPTS	Sum #2 thru #4	\$		\$	\$

B DISBURSEMENTS: Cash (Col. 1) Unpaid bills (Col. 2) In-kind (Col. 3) Total (Col. 4)

6	Expenditures	Sch. B1 - EXP	\$	\$	\$	\$
7	Ballot question expenditures	Sch. B1-BQ	\$	\$	\$	\$
8	Contributions to principal campaign committees	Sch. B2 - CAN	\$		\$	\$
9	Contributions to political party units	Sch. B2 - PTY	\$		\$	\$
10	Contributions to political committees and funds	Sch. B2 - PCF	\$		\$	\$
11	Independent expenditures See required form on page 18	Sch. B3 - IND	\$	\$		\$
12	TOTAL EXPENDITURES AND DISBURSEMENTS	Sum #6 thru #11	\$	\$	\$	\$
13	Ending cash balance ___/___/___	#1 + #5 - #12	\$			

LOANS AND UNPAID OBLIGATIONS SUMMARY

14	Total of all loans owed by your committee as of December 31, ____, including all previous years. (Sch. C)	\$
15	Total of all unpaid obligations owed by your committee as of December 31, ____, including all previous years. (Sch. D)	\$

CERTIFICATION

I, _____, certify that this report is complete, true, and correct.
 (print or type name)

 Signature of treasurer or deputy treasurer (check one) _____ Date

Any person who signs and certifies to be true a report or statement which the person knows contains false information, or who knowingly omits required information, is subject to a civil penalty imposed by the Board of up to \$3,000 and is subject to criminal prosecution for a gross misdemeanor.

INSTRUCTIONS FOR SCHEDULE A1 - CR

Use this schedule to itemize contributions received by your committee.

You must itemize contributions that in aggregate total more than \$200. When multiple contributions are received from the same source, show the source's name once and list all contributions from that source separately under the source's name.

Contributions from individuals, made on a joint checking account, are considered to be a contribution in equal proportions by the person(s) who sign the check unless the treasurer has personal knowledge or ascertains from the account holder who did not sign the check that the person is a joint contributor. If more than \$200 in aggregate is received from each contributor, disclose each contributor on a separate line with all the required information.

Entries must be in alphabetical order.

For itemized transactions you must disclose the:

- date the contribution was RECEIVED by your committee,
- registration number, if contributor is political committee, political fund, party unit, or state candidate committee,
- name of contributor,*
- contributor's full address (street, city, state, and zip code),** and
- amount of contribution(s).

* If the contributor is an individual, you must disclose the name of contributor's employer (if self- employed, list "self" and disclose the individual's occupation).

** If you the contributor is a political committee, political fund, party unit, or state candidate committee and you provide the registration number, you do not need to disclose the address.

Do not itemize contributions that total \$200 or less from any one source.

For Non-itemized transactions:

Disclose the total of all contributions of \$200 or less from all sources on the "Non-itemized receipts" line at the bottom of the schedule.

SCHEDULE A1 - CR - CONTRIBUTIONS RECEIVED

Make photocopies of this page if additional space is needed

Page ____ of ____

Date	Committee registration number	Name and full address of contributor <small>If contributor is an individual list the name of employer (if self-employed, list "self" & disclose the occupation)</small>	Col. 1 Cash	Col. 2 In-kind <small>(list item & fair market value)</small>	Col. 3 Total Cash & in-kind
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
Total of non-itemized receipts			\$	\$	\$
TOTALS			\$	\$	\$
			To pg. 3, line 2, col. 1	To pg. 3, line 2, col. 3	To pg. 3, line 2, col. 4

It is unlawful to use this information for commercial purposes.

INSTRUCTIONS FOR SCHEDULE A2 - LP

All entries must be in alphabetical order.

Use this schedule to itemize loans received during this reporting period that in aggregate total more than \$200 owed to any one financial institution, individual, or other entity.

For itemized transactions you must disclose the:

- date the loan was originally made,
- name of the lender and any endorsers*,
- full address (street, city, state, and zip code) of the lender and any endorsers, and
- amount of the loan.

*For individuals who are lenders or endorsers, you must disclose the individual's occupation and employer (if self-employed, list "self" and disclose the individual's occupation).

Do not itemize loans that total \$200 or less from any one entity.

For Non-itemized transactions:

Disclose the total of all loans of \$200 or less on the "Non-itemized receipts" line at the bottom of the schedule.

INSTRUCTIONS FOR SCHEDULE A2 - MISC

Use this schedule to itemize all receipts from miscellaneous income that in aggregate total more than \$200 from any one source including repayment of loans made by your committee to an individual or other entity.

For itemized transactions you must disclose the:

- date the receipt was originally received,
- name of the source*,
- full address (street, city, state, and zip code) of the source of the receipt,
- description of purpose or type of miscellaneous income, and
- amount of receipt(s).

* For receipts from an individual, you must disclose the individual's occupation and employer (if self-employed, list "self" and disclose the individual's occupation).

Do not itemize receipts that total \$200 or less.

For non-itemized transactions:

Disclose the total of all receipts from miscellaneous income of \$200 or less on the "Non-itemized receipts" line at the bottom of the schedule.

SCHEDULE A2 - LP - RECEIPTS FROM LOANS PAYABLE (OWED BY COMMITTEE)

Make photocopies of this page if additional space is needed.

Page ____ of ____

Date	Name and full address Name of employer if individual (if self-employed, list "self" & disclose the occupation)	Total receipts from loans payable
		\$
		\$
		\$
		\$
Total of non-itemized receipts		\$
TOTALS		\$
		To pg. 3, line 3, col. 1 & 4

SCHEDULE A2 - MISC - RECEIPTS FROM MISCELLANEOUS INCOME

Date	Name and full address Name of employer if individual (if self-employed, list "self" & disclose the occupation)	Description or purpose of miscellaneous income	Total receipts from miscellaneous income
			\$
			\$
			\$
			\$
Total of non-itemized receipts			\$
TOTALS			\$
			To pg. 3, line 4, col. 1 & 4

It is unlawful to use this information for commercial purposes.

INSTRUCTIONS FOR SCHEDULE B1 - EXP

Use this schedule to itemize all expenditures made by your committee including contributions made to federal and local (non Chapter 10A) candidate committees.

You must itemize disbursements that in aggregate total more than \$200 to any one payee. When multiple transactions occur with one payee, show payee's name once and list all transactions with that payee separately under the payee's name.

Entries must be in alphabetical order.

For itemized transactions you must disclose the:

- date your committee made each expenditure,
- name of payee*,
- payee's full address, (street, city, state, and zip code),
- purpose of expenditure, and
- amount of disbursement(s).

COMPLIANCE ALERT!

Reporting reimbursements to people who purchased items on behalf of your committee or payments to credit card companies requires you to provide some extra information.

To report a reimbursement or credit card payment:

- 1) List the name and complete address of the payee (the person being reimbursed or the credit card company being paid).
- 2) In the "specific purpose" column include:
 - a. The name of each vendor of goods or services being reimbursed or that is being paid for through the credit card company;
 - b. If the total of the reimbursement or credit card payment attributable to a vendor is more than \$200, include the vendor's complete address.
 - c. A description of the item or services for which reimbursement is being made;
 - d. The date of the payment;
 - e. The amount of the payment.

Alternatively, a committee may report each underlying expenditure being reimbursed as a separate expenditure to the underlying vendor.

Non-itemized transactions:

Disclose the total of all expenditures made of \$200 or less on the "Non-itemized expenditures/disbursements" line at the bottom of the schedule.

SCHEDULE B1 - EXP - EXPENDITURES

Make photocopies of this page if additional space is needed.

Page _____ of _____

Date	Name and full address of payee, including third party payees	Specific purpose of expenditure (e.g. flyers)	Col. 1 Cash	Col. 2 Contrib. to federal and local committee	Col. 3 Unpaid bills	Col. 4 In-kind (list item & fair market value)	Col. 5 Total Cash & in-kind	
			\$	\$	\$	\$	\$	
			\$	\$	\$	\$	\$	
			\$	\$	\$	\$	\$	
			\$	\$	\$	\$	\$	
			\$	\$	\$	\$	\$	
			\$	\$	\$	\$	\$	
			\$	\$	\$	\$	\$	
			\$	\$	\$	\$	\$	
			\$	\$	\$	\$	\$	
Total of non-itemized expenditures/disbursements			\$	\$	\$	\$	\$	
TOTALS			\$	\$	\$	\$	\$	
					Add totals of col. 1 & 2 To pg. 3, line 6, col. 1	To pg. 3, line 6, col. 2	To pg. 3, line 6, col. 3	To pg. 3, line 6, col. 4

It is unlawful to use this information for commercial purposes.

INSTRUCTIONS FOR SCHEDULE B4 – BQ

Use this schedule to itemize expenditures made toward promoting or defeating a ballot question.

You must itemize expenditures that in aggregate total more than \$200 to any one ballot question. When multiple transactions occur with one vendor, show the vendor’s name once and list all transactions with that vendor separately under the vendor’s name.

Entries must be in alphabetical order.

For itemized contributions you must disclose the:

- date the expenditure was made by your committee;
- name of the vendor, including third party payees;
- vendor’s full address (street, city, state, and zip code);
- identification of the ballot question; and
- amount and purpose of expenditure(s);

Do not itemize expenditures that total \$200 or less on any one ballot question.

For Non-itemized transactions:

You must disclose the total of all expenditures of \$200 or less on the “Non-itemized expenditures/disbursements” line at the bottom of the form.

SCHEDULE B4 – BQ - BALLOT QUESTIONS

Make photocopies of this page if additional space is needed.

Page _____ of _____

Date	Name and full address of vendor (including third party payees)	Description of Ballot Question	Purpose of Expenditure	Col. 1 Cash	Col 2. Unpaid bills	Col. 3 In-kind (list item & fair market value)	Col. 4 Total
				\$	\$	\$	\$
				\$	\$	\$	\$
				\$	\$	\$	\$
				\$	\$	\$	\$
Non-itemized expenditures/disbursements				\$	\$	\$	\$
TOTALS				\$	\$	\$	\$
				To pg. 3, line 7, col.1	To pg. 3, line 7 col. 2	To pg. 3, line 7, col 3	To pg. 3, line 7, col 4

It is unlawful to use this information for commercial purposes.

INSTRUCTIONS FOR SCHEDULE B2 – CAN

Use this schedule to itemize contributions given by your committee to the principal campaign committee of a state legislative or constitutional office candidate committee (registration # begins with 1)

You must itemize contributions that in aggregate total more than \$200. When multiple contributions are given to the same committee, show the receiving committee's name once and list all transactions with that committee under the committee's name.

Entries must be in alphabetical order by candidate's last name.

For itemized contributions you must disclose the:

- date the contribution was given by your committee,
- recipient committee's registration number,
- name of recipient committee*,
- recipient committee's full address (street, city, state, and zip code), and
- amount of contribution(s).

* For an approved expenditure, you must also list the name and full address of the vendor paid. If a contribution is returned to your committee in the same year that it was given, it should be disclosed with a minus sign (-) in the same box as the original contribution was disclosed with the yearly total in the total. (i.e., Doe, John, #13456, cash: \$300 - \$50, = total: \$250).

If a contribution is returned to your committee in a year other than when it was given, report the return on Schedule A2 – Miscellaneous Income. The description or purpose should be "return of a contribution" and list the year the contribution was given.

Do not itemize contributions that in aggregate total \$200 or less.

For Non-itemized transactions:

Disclose the total of all contributions of \$200 or less given to principal campaign committees, on the "Non-itemized expenditures/disbursements" line at the bottom of the schedule.

SCHEDULE B2 – CAN - CONTRIBUTIONS TO PRINCIPAL CAMPAIGN COMMITTEES

Make photo copies of this page if additional space is needed.

Page ____ of ____

Entries must be in alphabetical order by candidate's last name.

Date	Committee registration number	Name and full address of committee (for approved expenditure; also list name and full address of vendor paid)	Col. 1 Cash	Col. 2 Goods or services (list item & fair market value)	Col. 3 In-kind contribution (list item & fair market value)	Col. 4 Total Cash & in-kind
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
Total of non-itemized contributions/disbursements			\$	\$	\$	\$
TOTALS			\$	\$	\$	\$
			Add totals of col. 1 & 2 To pg. 3, line 8, col. 1.		To pg. 3, line 8, col 3	To pg. 3, line 8, col 4

It is unlawful to use this information for commercial purposes.

INSTRUCTIONS FOR SCHEDULE B2 – PTY

Use this schedule to itemize contributions given by your committee to political party units (registration # begins with 2).

You must itemize contributions that in aggregate total more than \$200. When multiple contributions are given to the same party unit, show the receiving party unit's name once and list all transactions with that party unit under the party unit's name.

Entries must be in alphabetical order.

For itemized contributions you must disclose the:

- date the contribution was given by your committee ,
- recipient party unit's registration number,
- name of recipient party unit*,
- recipient party unit's full address (street, city, state, and zip code), and
- amount of contribution(s).

* For an approved expenditure, you must also list the name and full address of the vendor paid. If a contribution is returned to your committee in the same year that it was given, it should be disclosed with a minus sign (-) in the same box as the original contribution was disclosed with the yearly total in the total. (i.e., 98th Senate District, #23456, cash: \$300 - \$50, = total: \$250).

If a contribution is returned to your committee in a year other than when it was given, report the return on Schedule A2 – Miscellaneous Income. The description or purpose should be “return of a contribution” and list the year the contribution was given.

Do not itemize contributions that in aggregate total \$200 or less.

For Non-itemized transactions:

Disclose the total of all contributions of \$200 or less given to political party units on the “Non-itemized expenditures/disbursements” line at the bottom of the schedule.

SCHEDULE B2 – PTY – CONTRIBUTIONS TO POLITICAL PARTY UNITS

Make photocopies of this page if additional space is needed.

Page ____ of ____

Entries must be in alphabetical order

Date	Committee registration number	Name and full address of committee (for approved expenditure; also list name and full address of vendor paid)	Col. 1 Cash	Col. 2 Goods or services (list item & fair market value)	Col. 3 In-kind contribution (list item & fair market value)	Col. 4 Total Cash & in-kind
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
Total of non-itemized contributions/disbursements			\$	\$	\$	\$
TOTALS			\$	\$	\$	\$
			Add totals of col. 1 & 2 To pg. 3, line 9, col. 1		To pg. 3, line 9, col 3	To pg. 3, line 9, col 4

It is unlawful to use this information for commercial purposes.

INSTRUCTIONS FOR SCHEDULE B2 – PCF

Use this schedule to itemize contributions given by your committee to other political committees and political funds (registration # begins with 3, 4, 5, 6, 7, or 8).

You must itemize contributions that in aggregate total more than \$200. When multiple contributions are given to the same committee, show the receiving committee's name once and list all transactions with that committee under the committee's name.

Entries must be in alphabetical order.

For itemized contributions you must disclose the:

- date the contribution was given by your committee ,
- recipient committee 's registration number,
- name of recipient committee *,
- recipient committee 's full address (street, city, state, and zip code), and
- amount of contribution(s).

* For an approved expenditure, you must also list the name and full address of the vendor paid. *If a contribution is returned to your committee in the same year that it was given, it should be disclosed with a minus sign (-) in the same box as the original contribution was disclosed with the yearly total in the total. (i.e., ABC PAC, #43456, cash: 3200 - \$50, = total: 2150).*

If a contribution is returned to your committee in a year other than when it was given, report the return on Schedule A2 – Miscellaneous Income. The description or purpose should be “return of a contribution” and list the year the contribution was given.

Do not itemize contributions that in aggregate total \$200 or less.

For Non-itemized transactions:

Disclose the total of all contributions of \$200 or less given to other political committees and political funds on the “Non-itemized expenditures/disbursements” line at the bottom of the schedule.

SCHEDULE B2 – PCF - CONTRIBUTIONS TO POLITICAL COMMITTEES AND POLITICAL FUNDS

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Page ____ of ____

Entries must be in alphabetical order

Date	Committee registration number	Name and full address of committee (for approved expenditure; also list name and full address of vendor paid)	Col. 1 Cash	Col. 2 Goods or services (list item & fair market value)	Col. 3 In-kind contribution (list item & fair market value)	Col. 4 Total Cash & in-kind
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
	#		\$	\$	\$	\$
Total of non-itemized contributions/disbursements			\$	\$	\$	\$
TOTALS			\$	\$	\$	\$
			Add totals of col. 1 & 2 To pg. 3, line 10, col. 1		To pg. 3, line 10, col 3	To pg. 3, line 10, col 4

It is unlawful to use this information for commercial purposes.

INSTRUCTIONS FOR SCHEDULE B3 – IND

Use this schedule to itemize independent expenditures made by your committee to advocate the election or defeat of a state legislative, judicial or constitutional office candidate only.

Independent expenditure definition:

- An independent expenditure is an expenditure that advocates the election or defeat of a clearly identified candidate that is made without the express or implied consent, authorization, cooperation of, and not in concert with, or at the request or suggestion of any candidate, candidate's treasurer, or candidate's agent.

Reporting Instructions for Independent Expenditures

- List independent expenditures alphabetically by the last name of the candidate that the expenditure was for or against.
- In the vendor column, list the name and address of the vendor paid. Use additional rows for multiple independent expenditures affecting the same candidate.
- Itemize an expenditure to a particular vendor only if your committee spent more than \$200 with the vendor on independent expenditures. For example, if your committee purchased a \$150 advertisement for candidate A and another advertisement worth \$160 for candidate B you would list the vendor for each candidate because total independent expenditures with the vendor exceeds \$200. You only need to provide the address of a vendor the first time you list the vendor on schedule B3.
- If you do not spend more than \$200 with a vendor on independent expenditures you do not itemize the expenditures to that vendor under any candidate's name. Instead you include the amount in the Non-itemized Independent Expenditure total at the bottom of the schedule.
- Be sure to indicate if each itemized expenditure was for or against the candidate.
- If your committee makes an independent expenditure that lists more than one candidate you must allocate the cost of the expenditure between the candidates and report the allocated amount under each candidate's name.
- Return a completed Affidavit of Independent Expenditures (on the bottom of this page) with your report.

AFFIDAVIT OF INDEPENDENT EXPENDITURES

USE THIS FORM ONLY IF YOUR COMMITTEE MADE INDEPENDENT EXPENDITURES RELATED TO STATE LEGISLATIVE, JUDICIAL, OR CONSTITUTIONAL OFFICE

State of Minnesota, County of _____) ss

I, the undersigned treasurer, being first duly sworn, states as follows:

1. The _____ made independent expenditures as described on schedule B3-Ind of the report which this affidavit
Name of committee
 accompanies. The independent expenditures made by the committee were not made with the authorization or expressed or implied consent of, or in cooperation or in concert with, or at the request or suggestion of any candidate, any candidate's principal campaign committee or agent.

Signature of treasurer

Date signed

Notarization

Sworn to and subscribed before me this _____ day of _____, 20 ____.

Signature of notary public or other officer empowered to administer oaths

Notary Seal

SCHEDULE B3 – IND – INDEPENDENT EXPENDITURES

Make photocopies of this page if additional space is needed.

Page ____ of ____

FOR STATE LEGISLATIVE, CONSTITUTIONAL AND JUDICIAL OFFICE CANDIDATES ONLY

LIST INDEPENDENT EXPENDITURES FOR LOCAL CANDIDATES ON PAGE 9 SCHEDULE B1 - EXPENDITURES

Name of candidate affected and office sought (List last name, first name)	Candidate Registration Number	Date of Expenditure	Candidate Expenditure is For Against		Vendor (Name and Address of Vendor Paid)	Specific purpose of expenditure	Col. 1 Cash	Col. 2 Unpaid bills	Col. 3 Total
			F	A					
	#						\$	\$	\$
	#						\$	\$	\$
	#						\$	\$	\$
	#						\$	\$	\$
	#						\$	\$	\$
	#						\$	\$	\$
Total of non-itemized expenditures/disbursements							\$	\$	\$
TOTALS							\$	\$	\$
							To p. 3, line 11, col.1	To p. 3, line 11 col. 2	To p. 3, line 11, col 4

It is unlawful to use this information for commercial purposes.

INSTRUCTIONS FOR SCHEDULE C - LOANS

Use this schedule to itemize any loan with an outstanding balance payable or receivable as of December 31, 20___, including all unpaid notes and loans from previous years.

You must disclose the:

- date the loan was originally made,
- name of the lender or endorser*,
- full address of lender or endorser (street, city, state, and zip code), and
- amount of the outstanding balance.

* For receipts from an individual, you must disclose the individual's occupation and employers (if self-employed, list "self" and disclose the individual's occupation).

INSTRUCTIONS FOR SCHEDULE D – UNPAID OBLIGATIONS

Use this schedule to itemize all unpaid obligations as of December 31, 20___.

Include on this schedule the unpaid portion of any item listed on Schedules B1-Expenditures as well as any unpaid bills carried forward from a prior year.

You must disclose the:

- month, day, year the obligation to pay was incurred,
- name of the creditor or individual owed,
- full address (street, city, state, and zip code) of the creditor or individual owed,
- purpose of the credit extension, and
- amount of the obligation.

SCHEDULE C - LOANS PAYABLE AND RECEIVABLE

Make photocopies of this page if additional space is needed

Page ____ of ____

Date of original loan	Name, full address, employer, and occupation for each lender, endorser, or borrower (if self-employed, list "self" and the occupation)	Col. 1 Payables Amount owed by committee at the end of period	Col. 2 Receivables Amount receivable (owed to committee) at the end of period
		\$	\$
		\$	\$
		\$	\$
		\$	\$
TOTALS		\$	\$
		To pg. 3, line 14	

SCHEDULE D - UNPAID OBLIGATIONS FROM PRIOR YEARS

Date	Name and full address of each creditor	Purpose of credit extension	Col. 1 Outstanding Amount
			\$
			\$
			\$
			\$
TOTALS			\$
			To pg. 3, line 15

It is unlawful to use this information for commercial purposes.

DEFINITIONS

Goods and services for other entities	Goods and services purchased by your committee or fund on behalf of a candidate, or other political committee or political fund.
Independent Expenditures	<p>Expenditures made on behalf of a candidate without the express or implied consent, authorization, cooperation of, or at the request or suggestion of the candidate, the candidate's treasurer, or the candidate's agent. A political committee or political fund may make an independent expenditure provided that:</p> <ul style="list-style-type: none">▪ the communication contains a statement (disclaimer) that the activity is an independent expenditure and the candidate is not responsible for it; <i>and</i>▪ this statement (disclaimer) is included in oral communications, in conspicuous type on the front page of all literature and advertisements published or posted, and at the end of all broadcast advertisements; <i>and</i>▪ the treasurer of the committee making the independent expenditure reports the expenditure on an <i>Affidavit and Report of Independent Expenditures</i> with a sworn statement that the expenditure was not made with the authorization or expressed or implied consent of, or in cooperation with or in concert with, or at the request or suggestion of any candidate, candidate's committee, or candidate's agent.
Loans Payable	Loans that the committee owes to a financial institution, individual, or other entity.
Loans Receivable	Loans that are owed to the committee from other individuals or entities.
Miscellaneous income	Money received by the committee that is not a contribution or loan (i.e., interest from an interest bearing account).
Unpaid bills	Advance of credit for goods or services for which payment has not been made. An advance of credit is an unpaid bill from the time it is incurred, regardless of when an actual invoice is received.