## · Maryland State Board of Elections - Campaign Fund Report Summary Sheet

ž.								
A. Name of Account (as filed wit	h Election Office)			B. Account N	Number (Assigned by		Be Duplicated As N	eeded
	•				various (1331gilea o	y cicciion	office).	
FREDERICK C. Elective Office	Countians	FOR TRUE REPO	bicanis			······································		
C. Elective Office	D. District Represented			E. Bank Acco	unt Information	<del></del>		-
	}	E1. Checking Accoun		Bank Name			CCOUNT Number	
		E2. Other Accounts i		N A			NA	
				10 (14		†	, C(1)	-
F. Reporting Due Dates and Tran-	saction Periods.							-
	71-0				G. Final Report			
Report Due Date: 8	13/02				and account is to			
,	4 11	,	21.21		if a cash balance H. Amendment			ıns.
Beginning Transaction Date	e: 7/36/2002 Ending	g Transaction Date:	71131	02	report Filed on:	- rms rep	ort amends the	1
(pleas	e refer to your Pre Report Notice	ce for the correct dates)				(Original	Report due date)	5
Important: To avoid filing amen	dments it is essential that you	read the detailed instructions		Column A - TOTA		OTALS	Column C - TOTA	ALS
to all entries on the reverse side of	each form, check your math or	n each schedule and place en		Current Period	Prior Period		to Date	
proper columns.				inter Total Figures	Enter Figures fr Column C of Pr		Add Columns A a across to complete	
I. ITEMIZED TRANSACTIONS			A	ttached Schedules			Column	
J. Contributions, Transfers in a	and other Income - Schedule	1, 1A, and 1B						
J1. Cash Balance from Line LL of			es Only		~ 0	_	-0-	
K. Contributions - Schedule 1, Co				-0-				
L. Ticket Purchases - Schedule 1,	Column 5						<del> </del>	_
M. Federal Committees - Schedul	le 1, Column 6						:	
N. Political Clubs - Schedule 1, C	Column 7							
O. Transfers In - Md. Candidate a	nd Slate Accounts - Schedule	1A, Column 10						
P. Transfers In - Md. Pol. Party C	Central Committee Accounts - S	Schedule 1A, Column 11						
Q. Transfers In - PAC Accounts -	- Schedule 1A, Column 12							
R. Loans Received - Schedule 1B	3, Column 15							
S. Other - Schedule 1B, Column								
T. Total Money Receipts (Col. A								
U. Value of In-Kind Contribution	s Received - Schedule 1B, Col	umn 17		\0/				
V. Total Receipts - (Col. A Lines	T + U) (Col. C. Lines $T + U$ )							
W. Expenditures - Schedule 2								
X. Salaries and Other Compensati	ion - Column 22			_ 0 _	- 0	_	~ 0 -	_
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(a) Page	of	
(b) Repor	Due Date	

## Schedule 1 - Contributions

(see schedules 1A and 1B for other types of Income)

See Instructions on reverse side

Countieurs For True REPOBUTANS

(d)	Campaign	Fund	Account Number	·
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1		2		3		4	5	6	7
Date Received	Complete Name and Ade For entries in columns 6 list name and address of	and 7	This column must be com- pleted (see re- verse side, Column 2	C H E C K	C A S H	Contributions other than ticket purchases from an Individuals, Corporations, etc.	Ticket purchases by Individuals, Corporations etc.	Contributions from Federal Committees (Include ticket purchases)	Contributions from Political Clubs (include ticket purchases)
	-0		Aggregate to Date:				Price Per Ticket: \$		
	(		Aggregate to Date:				Price Per Ticket: \$		,
<i>:</i>			Aggregate to Date:				Price Per		
		natara	Aggregate to Date:				Price Per		
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(a)	Page	of	
(h)	Report Due Do	to	

		(see schedules I and IB for a				
(c) Nam	e of Account Frad	CRICK Court	reverse side	TAJO	L Reput	BCI CANS
			<del>-</del>			
8	T	9		10	11	12
Date Received	Name of the Campaign Account fro	om which the transfer is received	This Column must be completed (see reverse side, Column 9)	From MD Candidate Accounts, Candidate Committee Accounts or Slate Accounts (Include Ticket Purchases)	From MD Political Party Central Committee Accounts (Include Ticket Purchases)	From MD PACs and Non Federal Out of State PACs (Include Ticket Purchases)
			Aggregate to Date			
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Failure to provide all the information required by this form will be regarded as a FAILURE TO FILE.

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. (a)	Page of	
(P)	Report Due Date	

## Schedule 1B Other Receipts and In-Kind Contributions (see schedules 1 and 1A for other types of Income)

(c) Name of A	count Frenchick	/ 0	ructions on reve みるなら	rse side For	True	REPOBLICANS
(d) Campaign	Fund Account Number					
13	14	<u> </u>	15	16	17	18
Date	Complete Name and Address of Payor		Other Rec	ceipts	In-Kind	Remarks

13	14	15	16	17	18
Date	Complete Name and Address of Payor		Receipts	In-Kind	Remarks
Received		Loans Received (Also place on Schedule 3 if unpaid)	Other e.g. Refunds, Rebates, Items Sold, Interest or Other Misc. Income (Describe in Column 18)	Contribution Fair Market Value of In-Kind Contribution Received (Describe in Column 18)	
	·	Aggregate to Date:	1	Aggregate to Date:	
		\$		\$	
		Aggregate to Date:		Aggregate to Date:	
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		Aggregate to Date:		Aggregate to Date:	
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Totals This Pa	ge				
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Forms may be duplicated as needed

Schedule 2 – EXPENDITURES

(a) Page of (b) Report Due Date

See instructions on reverse side

FREDUCICK COUNTIANS FOR TRUC

Tava Reprovements

(d) Campaign Fund Account Number

(c) Name of Account

Expenses must be paid by the treasurer, by check from the Campaign bank account - Checks must be signed by the treasurer.

	1	dia		Typing of the state of the stat		H	Expenditure Classification	Classificati	uo								
2	92		21	22	-	4	25	26	27		М	30	31	22	33		35
Date	Name and Address To Whom Paid (List name of Candidate or Committee when completing column 31).	ing column 31).	Check	and	Rent and other office expenses	w .5·	Media (radio, T.V., newspapers, billboards)	Printing and Campaign Materials	Direct Mailing by Mail House	Postage	Purchase of Equip- ment (Identify in col. 35)	Expenses of Your Fundraising Events (Describe in col. 35)	Transfers Out to Other MD Treasurers (Includes Ticket Purchases)	Loan Repayment	Other (Describe in Col. 35)	Transfer to or from Interest Bearing Account (Enter Acct. # in Cot. 35)	Remarks
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TOTA	TOTALS THIS PAGE			8	23	77	83	56	27	28	29	30	31	32	33		

Failure to provide all the information required by this form will be regarded as a failure to file.

SBE 13-05 (Revl 1-99)

Forms may be duplicated as needed.

(a) Page o

Thus KEPUBUILANS Schedule 3 - Outstanding Obligations

See instructions on reverse side

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(d) Campaign Fund Account Number\_

(c) Name of Account\_

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Unpaid Bills Other Than Loans							
	(44)	iption				. •	
	L	Descr		 			,
	(43)	Balance Due					
	42	Balance					
	41	In-Kind Interest Contribution (Enter on schedule. 1B Col. 17)					
	-		 				
Loans	40	% of Prime Rate Day Loan is Accepted					
	39	Interest Rate Charged					
		Writen Consent Filed Herewith					
	38	•Written Consent Previously Filed					
	37	Date Loan Accepted or obligation incurred					
	36						
		Name and Address of Creditor			(		Totals This Page

\*Article 33, § 13-208(b) provides that no loan may be made to the campaign of a candidate, or accepted on behalf of the campaign, without the written consent of the candidate. A copy of the written consent is given on Schedule 4 of the Campaign Fund Reporting Forms for the transaction period for which the loan is made.

Failure to provide all of the information required by this form will be regarded as a FAILURE TO FILE.