



City of Annapolis
 Office of the City Clerk
 160 Duke of Gloucester Street
 Annapolis, MD 21401-2517

MAY 28 2019
 CMG

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Campaign Fund Report
Summary of Receipts and Disbursements

Annapolis Democratic Central Committee (ADCC)

Name of candidate or committee as filed with the election office _____ Office _____ Ward _____

Bank information

	Bank name	Account number
1. Checking	<u>BBAT</u>	
2. Other	_____	_____

Transaction period from: _____ to _____
 Due no later than 4:30PM on the last day of each transaction period. (See Candidate Packet Memo for dates)

Final Surplus funds distributed to (4.44.040):

Summary of Receipts and Disbursements

1. Cash balance - beginning of transaction period	\$	<u>3615.40</u>	
2. Receipts from Schedule 1, column 4		<u>50.00</u>	
3. Proceeds from Schedule 2, column 4		<u>0</u>	
4. Total cash available (Add lines 1, 2 and 3)	\$	<u>3665.40</u>	0.00
5. Disbursements from Schedule 3:			
Column 3	\$	<u>1465.72</u>	
Column 4		_____	
Column 5		_____	
6. Total disbursements	\$	<u>1465.72</u>	0.00
7. Cash balance - end of transaction period (Subtract line 6 from line 4)		<u>2199.68</u>	
8. Total outstanding obligations from Schedule 4	\$	<u>0</u>	
9. In-kind contributions from Schedule 5, column 4	\$	<u>0</u>	

Under penalty of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete. (If report of candidate, candidate and treasurer must sign report; if committee, treasurer and chairman must sign report.)

Candidate N/A Date _____
 Treasurer [Signature] (acting) Date 5/28/19
 Chairman of Committee or Slate [Signature] Date 5/28/19



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Name of candidate or committee ADCC
 Report period - transactions from 7/2/2018 to 5/24/2019

Schedule 1 - Contributions and Receipts
 (Excluding Transfers, Loans and In-kind Contributions)

Date received	Complete name and residence address of Payer	Description of receipt. See instructions for code.				Amount
		Code *	Ticket price	Cash	Check #	
12/8/18	Guy Robinson 1341 E West Shady Side Rd Shady Side, MD 20784					50.00
					CC	
		* T, enter price per ticket		Rcpt #		
		Aggregate amount received from Payer to date				
					Check #	
		* T, enter price per ticket		Rcpt #		
		Aggregate amount received from Payer to date				
					Check #	
		* T, enter price per ticket		Rcpt #		
		Aggregate amount received from Payer to date				
					Check #	
		* T, enter price per ticket		Rcpt #		
		Aggregate amount received from Payer to date				
					Check #	
		* T, enter price per ticket		Rcpt #		
		Aggregate amount received from Payer to date				
					Check #	
		* T, enter price per ticket		Rcpt #		
		Aggregate amount received from Payer to date				

Total this page \$ 50.00



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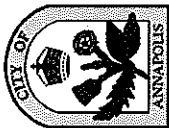
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Name of candidate or committee ADCC
 Report period - transactions from 7/2/18 to 5/26/19

Schedule 2 - Loans and Transfers

Date received	Complete name and residence address of Payer	Description of loan or transfer	Amount
		Aggregate amount of loan or transfer \$	
		Aggregate amount of loan or transfer \$	
		Aggregate amount of loan or transfer \$	
		Aggregate amount of loan or transfer \$	
		Aggregate amount of loan or transfer \$	
		Aggregate amount of loan or transfer \$	
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Total this page \$ _____



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Schedule 3 - Disbursements

1 Date	2 Payee and address	3 Salaries and all payments other than loan payments			4 Loan payments			5 Transfers to other funds (candidate or committee name required)	Amount
		Code	Amount	Method	Amount	Method	Method		
8/21/18	Tom McCarty 151 PG St. Annapolis, MD	F Reimburse	1465.72	Check # 1556 Cash Rcpt #		Check # Cash Rcpt #			
				Check # Cash Rcpt #		Check # Cash Rcpt #			
				Check # Cash Rcpt #		Check # Cash Rcpt #			
				Check # Cash Rcpt #		Check # Cash Rcpt #			
				Check # Cash Rcpt #		Check # Cash Rcpt #			
				Check # Cash Rcpt #		Check # Cash Rcpt #			
				Check # Cash Rcpt #		Check # Cash Rcpt #			
Totals this page \$			<u>1465.72</u>						<u>0.00</u>



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Report period - transactions from 7/2/18 to 5/26/19

Schedule 4 - Outstanding Obligations as of End of Report Period

1	2	3	4
Name and address	Description of debt (Loans, unpaid bills, etc.)	Date debt incurred	Amount

Total this page \$ 0.00



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Schedule 5 - In-kind Contributions

1 Date	2 Name and address of contributor	3 Description of In-kind Contribution	4 Fair Market Value (during this report period)

Total this page \$ _____