



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

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 MAY 28 2019
 CMG

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**Campaign Fund Report
 Summary of Receipts and Disbursements**

Sheila M. Finlayson Alderwoman 4
 Name of candidate or committee as filed with the election office Office Ward

Bank information

	<u>Bank name</u>	<u>Account number</u>
1. Checking	Severn Bank	[REDACTED]
2. Other		

Transaction period from: July 2, 2018 to May 26, 2019
 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>1,353.60</u>
2. Receipts from Schedule 1, column 4		<u>621.56</u>
3. Proceeds from Schedule 2, column 4		
4. Total cash available (Add lines 1, 2 and 3)	\$	<u>1,975.16</u>
5. Disbursements from Schedule 3:		
Column 3	\$	<u>517.80</u>
Column 4		
Column 5		
6. Total disbursements	\$	<u>517.80</u>
7. Cash balance - end of transaction period (Subtract line 6 from line 4)		<u>1,457.36</u>
8. Total outstanding obligations from Schedule 4	\$	
9. In-kind contributions from Schedule 5, column 4	\$	

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 Sheila M. Finlayson Date 5-27-2019

Treasurer [Signature] Date 5-27-2019

Chairman of Committee or Slate _____ Date _____



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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 #		
7-19-18	Century Properties, Inc PO Box 4543 Annapolis MD 21403	C			2468	250.00	
		* T, enter price per ticket		Rcpt #			
		Aggregate amount received from Payer to date					
7-2-2018	Anthony Copeland 3335 Arundel on the Bay Rd Annapolis, MD 21403	C				371.56	
		* T, enter price per ticket		Rcpt #			
		Aggregate amount received from Payer to date					
		* T, enter price per ticket		Rcpt #			
		Aggregate amount received from Payer to date					
		* T, enter price per ticket		Rcpt #			
		Aggregate amount received from Payer to date					
		* T, enter price per ticket		Rcpt #			
		Aggregate amount received from Payer to date					
		* T, enter price per ticket		Rcpt #			
		Aggregate amount received from Payer to date					

Total this page \$ 621.56



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Schedule 2 - Loans and Transfers

Date received	Complete name and residence address of Payer	Description of loan or transfer	Amount
	NONE	Aggregate amount of loan or transfer \$	00.00
		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 \$	
		Aggregate amount of loan or transfer \$	
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		Aggregate amount of loan or transfer \$	

Total this page \$ 00.00



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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)	
		Code	Amount	Method	Amount	Method	Amount	Amount	
7-27-18	Frederick Douglas Museum & Cul Ctr 3200 Wayman Dr Annapolis MD 21403	PL	150.00	Check # 1157					
				Cash					
				Rcpt #					
7-24-18	Annapolis Rotary Club PO Box 3175 Annapolis MD 21403	FE	260.00	Check # 1158					
				Cash					
				Rcpt #					
12-18-18	Office Depot 2411 Old Solomon Island Rd Annapolis MD 21401	OS	107.80	Check # 1159					
				Cash					
				Rcpt #					
				Check #					
				Cash					
				Rcpt #					
				Check #					
				Cash					
				Rcpt #					
Totals this page \$			<u>517.80</u>			<u>0.00</u>			<u>0.00</u>



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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
NONE			00.00

Total this page \$ 00.00



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Schedule 5 - In-kind Contributions

1	2	3	4
Date	Name and address of contributor	Description of In-kind Contribution	Fair Market Value (during this report period)
	NONE		00.00

Total this page \$ 00.00