



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

JUL 01 2019

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Campaign Fund Report
Summary of Receipts and Disbursements

MARC RODRIGUEZ FOR ANNAPOLIS
 Name of candidate or committee as filed with the election office

ALDERMAN
 Office

5
 Ward

Bank information

	<u>Bank name</u>	<u>Account number</u>
1. Checking	<u>CFG COMMUNITY BANK</u>	<u>[REDACTED]</u>
2. Other	_____	_____

Transaction period from: 6-24-19 to 6-30-19
 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>2170.98</u>
2. Receipts from Schedule 1, column 4		<u>0</u>
3. Proceeds from Schedule 2, column 4		<u>0</u>
4. Total cash available (Add lines 1, 2 and 3)	\$	<u>0.00</u>
5. Disbursements from Schedule 3:		
Column 3	\$	<u>0</u>
Column 4		<u>0</u>
Column 5		<u>0</u>
6. Total disbursements	\$	<u>0.00</u>
7. Cash balance - end of transaction period (Subtract line 6 from line 4)		<u>2170.98</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 For Marc Rodriguez: Gloria H. Thompson Date 7-1-19

Treasurer Gloria H. Thompson Date 7-1-19

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		
	NONE			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				
				Check #		
		* T, enter price per ticket	Rcpt #			
		Aggregate amount received from Payer to date				

Total this page \$ _____



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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 \$		
		Aggregate amount of loan or transfer \$		
		Aggregate amount of loan or transfer \$		
		Aggregate amount of loan or transfer \$		
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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			
	NONE			Check #		Check #			
				Cash		Cash			
					Rcpt #		Rcpt #		
				Check #		Check #			
				Cash		Cash			
				Rcpt #		Rcpt #			
				Check #		Check #			
				Cash		Cash			
				Rcpt #		Rcpt #			
				Check #		Check #			
				Cash		Cash			
				Rcpt #		Rcpt #			
				Check #		Check #			
				Cash		Cash			
				Rcpt #		Rcpt #			
Totals this page \$			<u>0.00</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			

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)
	NONE		

Total this page \$ _____