



City of Annapolis
 Board of Supervisors of Elections
 160 Duke of Gloucester Street
 Annapolis, MD 21401-2517

CITY OF ANNAPOLIS
 BOARD OF SUPERVISORS
 OF ELECTIONS

2021 SEP 13 PM 8:53

Elections@annapolis.gov • 410-263-7929 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Campaign Fund Report
Summary of Receipts and Disbursements

Brooks Schandelmeier; Brooks for Annapolis Alderperson 5
 Name of candidate, fund or committee as filed with the election office Office W

Bank information	Bank name	Account number
1. Checking	_____	On file with Elections Office
2. Other	_____	On file with Elections Office
	_____	On file with Elections Office

Transaction period from: 08/23/21 to 09/12/21

Due no later than 4:30PM on the dates specified in the Candidate Handbook

Final Report (Check if you intend to close the account.) Surplus funds distributed to (4.44.040): _____

Amended Report (Check if this is a filing of an amended report for the above transaction period.)

Summary of Receipts and Disbursements

1. Cash balance - beginning of transaction period		\$ <u>24,957.59</u>
2. Receipts from Schedule 1, column 4		<u>275.00</u>
3. Proceeds from Schedule 2, column 4		<u>0</u>
4. Total cash available (Add lines 1, 2 and 3)		\$ <u>25,232.59</u>
5. Disbursements from Schedule 3:		
Column 4	\$ <u>854.38</u>	
Column 5	_____	
Column 6	_____	
6. Total disbursements		\$ <u>854.38</u>
7. Cash balance - end of transaction period (Subtract line 6 from line 4)		<u>24,378.21</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 chair must sign report.)

Candidate Date 9/13/21

Treasurer Date 9/13/21

Chair of Committee or Slate _____ Date _____



City of Annapolis
 Board of Supervisors of Elections
 160 Duke of Gloucester Street
 Annapolis, MD 21401-2517

Elections@annapolis.gov • 410-263-7929 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Name of candidate, fund or committee Brooks for Annapolis

Report period - transactions from 08/23/21 to 09/12/21

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			
	See attached spreadsheet			Check #			
		* T, enter price per ticket		EFT			
		"Other" Description:			Rcpt #		
		AGGREGATE AMOUNT RECEIVED FROM PAYER TO DATE \$					
				Check #			
		* T, enter price per ticket		EFT			
		"Other" Description:			Rcpt #		
		AGGREGATE AMOUNT RECEIVED FROM PAYER TO DATE \$					
				Check #			
		* T, enter price per ticket		EFT			
		"Other" Description:			Rcpt #		
		AGGREGATE AMOUNT RECEIVED FROM PAYER TO DATE \$					
				Check #			
		* T, enter price per ticket		EFT			
		"Other" Description:			Rcpt #		
		AGGREGATE AMOUNT RECEIVED FROM PAYER TO DATE \$					
				Check #			
		* T, enter price per ticket		EFT			
		"Other" Description:			Rcpt #		
		AGGREGATE AMOUNT RECEIVED FROM PAYER TO DATE \$					

Total this page \$ _____

**Note – In order to receive contributions from a Political Action Committee (PAC), the PAC must be registered as certified/qualified and active with the Maryland State Board of Elections. If a PAC directly or indirectly, expends \$51. more to aid or oppose the nomination or election of a candidate, the PAC shall report a statement of contributions expenditures to the candidate's treasurer and said statement shall be included in this report. This provision applies any PAC located outside of the City with respect to any expenditures of funds within the City.

Date Received	Name	Address1	Address2	City	State	Zip	Code	Check #	Receipt #	Amount	Aggregate
8/25/2021	John Pica	14 State Circle		Annapolis	MD	21401	C	Credit Card	CC0825211	\$100	\$100
8/26/2021	Debbie Driscoll	1393 Stonecreek Rd		Annapolis	MD	21403	C	Credit Card	CC0826211	\$50	\$50
9/5/2021	Laura Day	7739 Acrocomia Dr		Harover	MD	21076	C	Credit Card	CC0905211	\$100	\$100
9/5/2021	Christine Kamenof	117 Edelmar Dr		Annapolis	MD	21403	C	Credit Card	CC0905212	\$25	\$25

\$275



City of Annapolis
 Board of Supervisors of Elections
 160 Duke of Gloucester Street
 Annapolis, MD 21401-2517

Elections@annapolis.gov • 410-263-7929 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Name of candidate, fund or committee Brooks for Annapolis

Report period - transactions from 08/23/21 to 09/12/21

Schedule 2 - Loans and Transfers

Date received	Complete name and residence address of lender or transferor	Description of loan or transfer	Amount
	None	Aggregate amount of loan or transfer \$	
		Loan Consent Form filed herewith <input checked="" type="checkbox"/>	
		Aggregate amount of loan or transfer \$	
		Loan Consent Form filed herewith <input checked="" type="checkbox"/>	
		Aggregate amount of loan or transfer \$	
		Loan Consent Form filed herewith <input checked="" type="checkbox"/>	
		Aggregate amount of loan or transfer \$	
		Loan Consent Form filed herewith <input checked="" type="checkbox"/>	
		Aggregate amount of loan or transfer \$	
		Loan Consent Form filed herewith <input checked="" type="checkbox"/>	
		Aggregate amount of loan or transfer \$	
		Loan Consent Form filed herewith <input checked="" type="checkbox"/>	

Total this page \$ _____



City of Annapolis
 Board of Supervisors of Elections
 160 Duke of Gloucester Street
 Annapolis, MD 21401-2517

Elections@annapolis.gov • 410-263-7929 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Name of candidate, fund or committee Brooks for Annapolis
 Report period - transactions from 08/23/21 to 09/12/21

Schedule 3 - Disbursements

1 Date	2 Payee and Address	3 Payment Method			4 All payments other than loan payments and transfers to other funds		5 Loan Payments Amount	6 Transfers to other funds (candidate or committee name required)
		Check #	Cash	EFT	Code	Amount		
	See attached spreadsheet							
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						
		"Other" Description:						

Date	Payee	Payee Address	Code	Amount	Method	Check #	Cash	Receipt #	Description
08/23/21	Friends of Sheila Finleyson	131 Brightwater Drive	CO	\$250.00	Check	#111			Contribution
08/26/21	ActiBlue	366 Summer St, Somerville, MA 02144	O	\$7.00	Debit				Credit Card Processing
08/31/21	BB&T	101 Hillsmere Dr, Annapolis, MD 21403	O	\$7.61	Debit				Bank fees
08/31/21	Tidmore	516 N. Charles St., Suite 212, Baltimore, MD 21201	PL	\$579.66	Check	#113			Walk piece design & print
09/03/21	Google	1600 Amphitheatre Parkway Mountain View, CA 94043	O	\$6.36	Debit				Domain purchase
09/03/21	ActiBlue	366 Summer St, Somerville, MA 02144	O	\$3.75	Debit				Credit Card Processing

\$854.38

