



**City of Annapolis**  
 Office of the City Clerk  
 145 Gorman Street, 3<sup>rd</sup> Fl  
 Annapolis, MD 21401-2535

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 SEP 08 2009  
 CMG

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**Campaign Fund Report**

**Summary of Receipts and Disbursements**

Friends of Rock Toews Alderman 8  
 Name of candidate or committee as filed with the election office Office            Ward           

Bank information	Bank name	Account number
1. Checking	PNC Bank	55-6079-3179
2. Other		

Transaction period from: August 19, 2009 to September 8, 2009  
 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>                    </u>	0.00
2. Receipts from Schedule 1, column 4		<u>1,000.00</u>
3. Proceeds from Schedule 2, column 4		<u>0.00</u>
4. Total cash available (Add lines 1, 2 and 3)	\$ <u>                    </u>	<u>1,000.00</u>
5. Disbursements from Schedule 3:		
Column 3	\$ <u>168.00</u>	
Column 4	<u>0.00</u>	
Column 5	<u>0.00</u>	
6. Total disbursements	\$ <u>                    </u>	<u>168.00</u>
7. Cash balance - end of transaction period (Subtract line 6 from line 4)	\$ <u>                    </u>	<u>832.00</u>
8. Total outstanding obligations from Schedule 4	\$ <u>                    </u>	<u>0.00</u>
9. In-kind contributions from Schedule 5, column 4	\$ <u>                    </u>	<u>17.98</u> <u>168.00</u> <sup>NET</sup>

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 [Signature] Date 9/8/09  
 Treasurer [Signature] Date 9/8/09  
 Chairman of Committee or State [Signature] Date 9/8/09



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Name of candidate or committee Friends of Rock Toews  
 Report period - transactions from August 19, 2009 to September 8, 2009

**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		
8/25/2009	Charles D. Fales 2018 Elmwood Road Annapolis, MD 21409					
		C		Check #	3213	1,000.00
		* T, enter price per ticket		Rcpt #		
		Aggregate amount received from Payer to date				1,000.00
				Check #		
		* T, enter price per ticket		Rcpt #		
		Aggregate amount received from Payer to date				0.00
				Check #		
		* T, enter price per ticket		Rcpt #		
		Aggregate amount received from Payer to date				0.00
				Check #		
		* T, enter price per ticket		Rcpt #		
		Aggregate amount received from Payer to date				0.00
				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 \$ 1,000.00



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Name of candidate or committee Friends of Rock Toews  
 Report period - transactions from August 19, 2009 to September 8, 2009

**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 \$	
		Aggregate amount of loan or transfer \$	
		Aggregate amount of loan or transfer \$	
		Aggregate amount of loan or transfer \$	
		Aggregate amount of loan or transfer \$	

Total this page \$ 0.00









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Name of candidate or committee Friends of Rock Toews

Report period - transactions from \_\_\_\_\_, \_\_\_\_\_ to \_\_\_\_\_, \_\_\_\_\_

**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 #		
			* T, enter price per ticket	Rcpt #		
		Aggregate amount received from Payer to date				0.00
		Code *	Ticket price	Cash		
				Check #		
			* T, enter price per ticket	Rcpt #		
		Aggregate amount received from Payer to date				0.00
		Code *	Ticket price	Cash		
				Check #		
			* T, enter price per ticket	Rcpt #		
		Aggregate amount received from Payer to date				0.00
		Code *	Ticket price	Cash		
				Check #		
			* T, enter price per ticket	Rcpt #		
		Aggregate amount received from Payer to date				0.00
		Code *	Ticket price	Cash		
				Check #		
			* T, enter price per ticket	Rcpt #		
		Aggregate amount received from Payer to date				
		Code *	Ticket price	Cash		
				Check #		
			* T, enter price per ticket	Rcpt #		
		Aggregate amount received from Payer to date				
		Code *	Ticket price	Cash		
				Check #		
			* T, enter price per ticket	Rcpt #		
		Aggregate amount received from Payer to date				

Total this page \$ \_\_\_\_\_

