



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

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 SEP 13 2017  
 BY: RWZ

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

Pfeiffer for Annapolis  
 Name of candidate or committee as filed with the election office

Alderman Office 7 Ward

**Bank information**

|             | <u>Bank name</u> | <u>Account number</u> |
|-------------|------------------|-----------------------|
| 1. Checking | <u>TD Bank</u>   | <u>[REDACTED]</u>     |
| 2. Other    | _____            | _____                 |

Transaction period from: August 21, 2017 to September 10, 2017

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>1,542.<sup>14</sup></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>1,542.<sup>14</sup> 0.00</u> |
| 5. Disbursements from Schedule 3:   |    |                                 |
| Column 3  | \$ | <u>100.<sup>05</sup></u>        |
| Column 4  |    | _____                           |
| Column 5  |    | _____                           |
| 6. Total disbursements  | \$ | <u>100.<sup>05</sup> 0.00</u>   |
| 7. Cash balance - end of transaction period (Subtract line 6 from line 4) |    | <u>1,442.<sup>14</sup></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 [Signature] Date 9/11/17

Treasurer Francine [Signature] Date Sept. 12, 2017

Chairman of Committee or Slate \_\_\_\_\_ Date \_\_\_\_\_





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Name of candidate or committee Pfiffner for Annapolis

Report period - transactions from 8/21/17 to 9/10/17

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

Total this page \$ N/A



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Name of candidate or committee Pfeiffer for Annapolis

Report period - transactions from 9/21/17 to 9/30/17

**Schedule 3 - Disbursements**

| 1      | 2                        | 3  |        |              | 4             |         | 5   |        |
|--------|--------------------------|--|--------|--------------|---------------|---------|---|--------|
| Date   | Payee and address        | Salaries and all payments other than loan payments |        |              | Loan payments |         | Transfers to other funds (candidate or committee name required) | Amount |
|        |                          | Code   | Amount | Method       | Amount        | Method  |   |        |
| 9/1/17 | Friends of Sarah Elfrink | CO   | 100.00 | Check # 1040 |               | 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 \$ 100.00

0.00

0.00



