



**City of Hyattsville, Maryland
CANDIDATE CAMPAIGN FINANCE REPORT**

CANDIDATE NAME: _____

TREASURER NAME: _____

OFFICE SOUGHT: _____

REPORTING PERIOD: *Start with day following end of last report; end one (1) day before due date. Enter Date as MM/DD/YYYY*

FROM:		THROUGH:	
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REPORT TYPE: *All reports must be filed by 1:00 p.m. of the day they are due.*

<input type="checkbox"/> Initial Report 21st Day before Election	<input type="checkbox"/> Second Report 7th Day before Election	<input type="checkbox"/> Post-Election Report 45th Day after Election
<input type="checkbox"/> Annual Report 1st Tuesday in September	<input type="checkbox"/> Amended Report (Explain Correction Below)	<input type="checkbox"/> Disposition of Funds Report (Must have ending cash balance of \$0 and no outstanding obligations)

SUMMARY OF REPORT

1.	Beginning Cash Balance	<i>Date of last prior report</i>	\$
2.	Monetary Contributions Received as reported on Schedule A, (Column E)		\$
3.	Initial Balance of New Loans (including loans to self) as reported on Schedule C (Column E)		\$
4.	Expenditures, Loan Payments, and Returned Contributions as reported on Schedule C (Column G); Schedule D (Column F); and Schedule E (Column F)		\$
5.	Ending Cash Balance (Sum of boxes 1, 2, 3, Minus Box 4) <i>If this is a Disposition of Funds Report, ending balance must be zero.</i>		\$
6.	Value of In-Kind Contributions Received as reported on Schedule B (Column F)	\$	
7.	Total Outstanding Obligations (unpaid loans and expenses) <i>If this is a Disposition of Funds Report, balance must be zero.</i>	\$	

CANDIDATE CERTIFICATION

I hereby swear or affirm, under penalty of perjury, that the report filed herewith is, to the best of my knowledge, a complete and full disclosure of all contributions and expenditures. I understand that the submission of false, erroneous, or incomplete information may be subject to penalties in accordance with the Hyattsville City Code.

Signature of Candidate

Date

Signature of Treasurer

Date