

# 24-HOUR REPORT

## For Municipal Candidates

Report Period: October 26 – November 7, 2016

### CANDIDATE INFORMATION

NAME OF CANDIDATE	TELEPHONE NUMBER
MAILING ADDRESS	OFFICE SOUGHT
CITY, ZIP CODE	DISTRICT NUMBER (IF ANY)
NAME OF AUTHORIZED COMMITTEE, IF ANY	

### TREASURER INFORMATION

NAME OF TREASURER	TELEPHONE NUMBER
MAILING ADDRESS	CITY, ZIP CODE

### CONTRIBUTOR INFORMATION

NAME OF CONTRIBUTOR	OCCUPATION
NUMBER AND STREET	EMPLOYER
CITY, STATE, ZIP CODE	<i>For in-kind contributions received, describe the goods or services received:</i>
DATE OF CONTRIBUTION	
CONTRIBUTION AMOUNT: \$	
IF IN-KIND, REPORT FAIR MARKET VALUE: \$	

### EXPENDITURE INFORMATION

NAME OF PAYEE	DATE OF EXPENDITURE
NUMBER AND STREET	EXPENDITURE AMOUNT
CITY, STATE, ZIP CODE	
PURPOSE OF EXPENDITURE	

I, \_\_\_\_\_ certify that the information in this report is true, correct and complete.

\_\_\_\_\_  
Signature of Treasurer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Date

## **INSTRUCTIONS FOR FILING 24 HOUR REPORTS**

If between October 26 through November 7, 2016, a candidate for state, county or municipal office makes a single expenditure of \$1,000 or more, receives a contribution of \$1,000 or more, or receives a loan from the candidate or candidate's spouse/domestic partner of \$1,000 or more, a 24 Hour Report must be filed.

The report must be filed within 24 hours of making the expenditure or receiving the contribution.

## **FACSIMILE TRANSMISSION**

A properly signed report may be faxed to the municipal clerk, provided the original is received by the municipal clerk within 5 calendar days.

## **IMPORTANT**

The information contained in this report must be included on the appropriate schedule of the 42-Day Post-Election Report.

## **QUESTIONS**

Please contact either the Clerk's Office or the Ethics Commission, (207) 287-4179.