

Maryland State Board of Elections - Campaign Fund Report Summary Sheet

A 3544

Forms May Be Duplicated As Needed

A. Name of Account (as filed with Election Office) REPUBLICANS FOR DINO FLORES		B. Account Number (Assigned by election office). LOCAL	
C. Elective Office STATES ATTORNEY	D. District Represented FREDERICK COUNTY	E. Bank Account Information	
		Bank Name FCB	Bank Account Number 1000 653501
		E1. Checking Account	E2. Other Accounts if Any

F. Reporting Due Dates and Transaction Periods.

Report Due Date: 11/26/02

Beginning Transaction Date: 10/19/02 Ending Transaction Date: 11/25/02
(please refer to your Pre Report Notice for the correct dates)

G. Final Report - Check if report is "final" and account is to be terminated. Cannot be final if a cash balance or outstanding debt remains.

H. Amendment - This report amends the report Filed on: _____
(Original Report due date)

Important: To avoid filing amendments it is essential that you read the detailed instructions relating to all entries on the reverse side of each form, check your math on each schedule and place entries in proper columns.	Column A - TOTALS Current Period	Column B - TOTALS Prior Period	Column C - TOTALS to Date
I. ITEMIZED TRANSACTIONS	Enter Total Figures from Attached Schedules	Enter Figures from Column C of Previous Report	Add Columns A and B across to complete this Column
J. Contributions, Transfers in and other Income - Schedule 1, 1A, and 1B			
J1. Cash Balance from Line LL of 2/1/99 Rpt (Enter in Col B and C) - Continuing Committees Only			
K. Contributions - Schedule 1, Column 4		2035.00	2035.00
L. Ticket Purchases - Schedule 1, Column 5		520.00	520.00
M. Federal Committees - Schedule 1, Column 6			
N. Political Clubs - Schedule 1, Column 7			
O. Transfers In - Md. Candidate and Slate Accounts - Schedule 1A, Column 10			
P. Transfers In - Md. Pol. Party Central Committee Accounts - Schedule 1A, Column 11			
Q. Transfers In - PAC Accounts - Schedule 1A, Column 12			
R. Loans Received - Schedule 1B, Column 15			
S. Other - Schedule 1B, Column 16			
T. Total Money Receipts (Col. A Lines K through S) (Col. B & C Lines J1 through S)			
U. Value of In-Kind Contributions Received - Schedule 1B, Column 17		2205.35	2205.35
V. Total Receipts - (Col. A Lines T + U) (Col. C. Lines T + U)	e	4760.35	4760.35
W. Expenditures - Schedule 2			
X. Salaries and Other Compensation - Column 22			
Y. Rent and Other Office Expenses - Column 23			
Z. Field Expenses - Column 24			
AA. Media - Column 25		100.00	100.00
BB. Printing and Campaign Materials - Column 26			
CC. Direct Mailing by Mail House - Column 27			
DD. Postage - Column 28			
EE. Purchase of Equipment - Column 29			
FF. Expenses of your Fundraising Events - Column 30		1505.50	1505.50
GG. Transfers Out to Other Maryland Treasurers - Column 31	949.50		
HH. Loan Repayment - Column 32			
II. Other - Column 33			
JJ. In-Kind Contributions Received (enter same figure as line U above)		2205.35	2205.35
KK. Total Expenditures (add lines X through JJ above)	949.50	3810.85	4760.35
LL. Cash Balance (Subtract line KK, Column C from line V, Column C)			e
Cash Balance Information			
MM. Cash Balance in Checkbook at the End of the Report Transaction Period.			e
NN. Cash Balance in Interest Bearing Accounts at the End of the Transaction Period.			e
Outstanding Obligations - Schedule 3			
OO. Balance of Loans at the End of the Transaction Period. - Column 42			e
PP. Outstanding Bills at the End of the Transaction Period. - Column 43			e
QQ. Total Obligations Outstanding. (Add lines OO and PP in Column C)			e

Under Penalty of Perjury, we declare that we have examined this report, including accompanying schedules, and to the best of our knowledge and belief they are complete and accurate.

RR. Signature of Candidate (Not required for Committee or Slate Reports)	DINO E. FLORES JR	11/25/02	
	Print name of candidate	date	
SS. Signature of Treasurer (Required for all reports)	BRYAN C. BLACK	11/25/02	
	Print name of treasurer	date	
TT. Signature of Chairman (Required for Committee or Slat Reports only)	MICHELLE D. FLORES	11/25/02	
	Printed name of Chairman	date	

All Reports Filed Must Bear Original Signatures

Failure to provide all the information required by this form will be regarded as a FAILURE TO FILE.

For Board Use Only

16 PM 3:05

FREDERICK COUNTY
BOARD OF ELECTIONS

Schedule 2 - EXPENDITURES

See instructions on reverse side

(c) Name of Account: REPUBLICANS FOR DINO FORNES

(d) Campaign Fund Account Number: LOCAL

Expenses must be paid by the treasurer, by check from the Campaign bank account - Checks must be signed by the treasurer.

Expenditure Classification																			
19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35			
Date	Name and Address To Whom Paid (List name of Candidate or Committee when completing column 31).	Check Number	Salaries and other Compensation	Rent and other office expenses	Field Expenses (Identify in col. 35)	Media (radio, T.V., newspapers, billboards)	Printing and Campaign Materials	Direct Mailing by Mail House	Postage	Purchase of Equipment (Identify in col. 35)	Expenses of Your Fundraising Events (Describe in col. 35)	Transfers Out to Other MD Treasurers (Includes Ticket Purchases)	Loan Repayment	Other (Describe in Col. 35)	Transfer to or from Interest Bearing Account (Enter Acct. # in Col. 35)	Remarks			
10/28	FRIENDS OF DINO FORNES	905										949.50							
												949.50							
TOTALS THIS PAGE															30	31	32	33	

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