

**CITY OF TAKOMA PARK, MARYLAND
2020 ELECTION CAMPAIGN FINANCE REPORT**

Candidate Name		Treasurer Name	
Office Sought	Mayor	Councilmember	
Reporting Period: <u>Start with the day following end of last report or the day of campaign finance registration; end one day before due date.</u>			
From		Through	
Report Type: Reports must be filed by 4:00 PM on the date due.			
1 st Report (Monday, Sept. 28)	2 nd Report (Monday, Oct. 12)	3 rd Report (Monday, Oct. 26)	
4 th Report (Monday, Nov. 9)	Disposition of Funds Report	Annual Report (Jan. 31)	
Amended Report (Explain Reason for Amended Report Below)			
	Beginning Cash Balance		\$
	Contributions Received (Schedule A + B)		\$
	Expenditures Made (Schedule C)		\$
	Other Disbursements (Schedule E + F)		\$
	Ending Cash Balance		\$

The following schedules are attached to this report:

Schedule A	Schedule B	Schedule C	Schedule D	Schedule E	Schedule F
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Candidate/Treasurer Certification

I hereby certify, under penalty of perjury, that the contents of the report and all schedules included are true and complete to the best of my knowledge, information, and belief.

If applicable, any safe harbor events comply with the City's election Code.

Candidate Signature Rayn B. Schlegel Date _____

Treasurer Signature Debra Place Date _____

**CITY OF TAKOMA PARK, MARYLAND
 2020 ELECTION CAMPAIGN FINANCE REPORT
 SCHEDULE E – REPORT OF RETURNED FUNDS OR CONTRIBUTED TO CITY GENERAL FUND**

Candidate Name:		Reporting Period: <u>Start with the day following end of last report or the day of campaign finance registration; end one day before due date.</u>				
Treasurer Name:		FROM:		THROUGH:		
Date Received	Date Returned	Person/Entity Whose Contribution Was Returned (if known)	Address	Reason	Amount Returned	Amount Contributed to City General Fund
				TOTAL	\$	\$
				TOTAL DISBURSED		\$

**CITY OF TAKOMA PARK, MARYLAND
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 SCHEDULE F – DISPOSITION OF SURPLUS FUNDS**

Candidate Name:		Reporting Period: <u>Start with the day following end of last report or the day of campaign finance registration; end one day before due date.</u>			
Treasurer Name:		From:		Through:	
				Beginning Balance:	\$
Date		Entity Funds Paid To	Address (include city, state, zip)		Amount
				Ending Balance	\$