CAMPAIGN CONTRIBUTION AND EXPENDITURE REPORT

For County, Municipal and School Board Candidates

Check if this report is an amendment

This report should be filed with the County Clerk of the county in which the election is held

1. Name of Candidate

Address			
City, State and Zip		Phone Number:	
Office Sought District Number		(Clerk's	s File Stamp)
Does the candidate have a campaign committee? ()Yes ()No If yes, complete the following:			
Name of Chairperson/Treasurer:			
Mailing Address	Phone Number:		
2. Type of Election: (check only one) ☐ Primary □ Primary Runoff □ Gen □ Special □ Annual School □			
 3. Type of Report: (check one) This report covers what period? (Preelection report Final report (check method by which surplus campaign funds were diated in the state of the state (for benefit of General Revenue Fund Account of the State Apportion A political party as defined in Ark. Code Ann. § 7-1-101 or a political party caucus of the Assembly, the Senate, or the House of Representatives Contributors to the candidate's campaign A nonprofit organization that is exempt from taxation under Section 501(c)(3) of the International Component of the State Report 		isposed)* ionment Fund) the Arkansas General	() *If the campaign has not ended, disposal of campaign funds is not required and the candidate may carry forward any remaining campaign funds to the next election in the cycle for that same office.
SUMM	IARY	FOR REPORTING PERIO	D CUMULATIVE TOTAL
4. Balance of campaign funds at beginning of reporting period			
5. Interest (if any) earned on campaign account			
6. Total Loans (enter total from line 12)			
7. Total Monetary Contributions (er			
8. Total Expenditures (enter total fr	,		
9. Balance of campaign funds at clo	· • • •		
10. If this is candidate's final report for an election, amount of carryover			
funds or outstanding indebtedness (use brackets to indicate debt)			
11. () NO ACTIVITY (check if you have r	not received contributions, loans, or made expenditu	ares during this reporting per	iod)

I certify to the best of my knowledge and belief that the information disclosed in this report is a complete, true, and accurate financial statement of my (the candidate's) campaign contributions and expenditures.

	Signature of Candidate or Candidate's Representative		
Sworn to and subscribed before me, a Notary Public, in and for	, County, Arkansas, on this day of,,		
(Legible Notary Seal)	Notary Signature		
My Commission Expires: Note: If faxed, notary seal must be legible (i.e., either stamped or raised and inked) and the original must			

follow within ten (10) days.

12. LOAN INFORMATION

Please Type or Print Do not list loans previously reported

DATE	NAME AND ADDRESS OF LENDING INSTITUTION	GUARANTOR(S) IF ANY	AMOUNT
13. TOTAL LOANS DURING REPORTING PERIOD \$			

IMPORTANT

The limits on campaign contributions do not apply to loans or contributions made by a candidate from his or her own personal funds to the campaign or to personal loans made by financial institutions to the candidate and applied to his or her campaign. Any loans made by a candidate to his or her campaign and any loans made by a financial institution to a candidate and applied to his or her campaign shall be reported in Section 12.

If a candidate desires to use or raise campaign funds to repay himself or herself for personal funds which he or she contributed to the campaign, then he or she would need to report those personal funds as a loan in Section 12.

If a candidate does not desire to use or raise campaign funds to repay himself or herself for personal funds which he or she contributed to the campaign, then those personal funds would not be reported in Section 12. Instead, they would be reported as a campaign contribution either in Section 16 or on line 18, depending upon the amount.

If a candidate has unpaid loans at the end of the primary, runoff, special, or general election, the source, description and amount of each such loan should be itemized in Section 29. Candidates ending their campaign in debt are permitted to raise funds to retire the debt subject to the restrictions contained in Ark. Code Ann. § 7-6-219.

14. NONMONEY CONTRIBUTIONS

Does not include volunteer services by individuals

Date of receipt	Full Name and Address of Contributor	Description of nonmoney item	Value of nonmoney item	Cumulative Total From This Contributor
	15. TOTAL NONMONE			

IMPORTANT

In addition to monetary contributions, candidates are required to report the receipt of any nonmonetary ("in-kind") contributions. A candidate receives an inkind contribution whenever a contributor provides him with an item or service without charge or for a charge that is less than the fair market value of the item or service in question.

The value of an in-kind contribution is the difference between the fair market value and the amount charged. In-kind contributions are addressed in greater detail in Sections 205 and 206 of the Commission's Rules on Campaign Finance & Disclosure.

16. ITEMIZED MONETARY CONTRIBUTIONS OVER \$50 *Please Type or Print*

(Use copies of this page as needed)					
Date	Full Name and Mailing Address of Contributor	Place Of Business Employer/Occupation	Amount of Contribution	Cumulative Total From This Contributor	
			□Primary □ Run-Off □General □ Debt	Contributor	
			□Primary □ Run-Off □General □ Debt		
			□Primary □ Run-Off □General □ Debt		
			□Primary □ Run-Off		
			General Debt		
			□Primary □ Run-Off □General □ Debt		
			□Primary □ Run-Off		
			□General □ Debt		
			□Primary □ Run-Off □General □ Debt		
			Primary Run-Off		
			□General □ Debt		
			□Primary □ Run-Off □General □ Debt		
	Subtotal of Contributions This Page				

Full Name and Mailing Address of Contributor Place Of Business Amount of Cumulative Total Date From This **Employer/Occupation** Contribution Contributor □Primary □ Run-Off □General □ Debt □Primary □ Run-Off General Debt **17. TOTAL ITEMIZED MONETARY CONTRIBUTIONS OVER \$50 18. TOTAL NONITEMIZED MONETARY CONTRIBUTIONS 19. TOTAL MONETARY CONTRIBUTIONS THIS REPORT** (includes totals from lines 17 and 18)

ITEMIZED MONETARY CONTRIBUTIONS OVER \$50

Please Type or Print

20. CAMPAIGN EXPENDITURES BY CATEGORY

Please Type or Print

	CATEGORY	TOTAL AMOUNT
Filing Fee		
Television Advertising		
Radio Advertising		
Newspaper Advertising		
Other Advertising		
Office Supplies		
Rent		
Utilities		
Telephone		
Postage		
Direct Mail		
Travel Expenses		
Entertainment		
Fundraising		
Repayment of Loans		
Returned Contributions		
Consultant Fees		
Polls		
Paid Campaign Workers		
Other (list)		
	21. TOTAL CAMPAIGN EXPENDITURES	

22. PAID CAMPAIGN WORKERS

(Includes any person you paid to work on your campaign, does not have to be full-time worker)

NAME OF WORKER	AMOUNT	NAME OF WORKER	AMOUNT
	PAID		PAID
23. TOTAL PAID CAMPAIGN WORKERS			

Name and Address of Supplier/Payee **Description of Expenditure Date of Expenditure** Amount of Expenditure 25. TOTAL ITEMIZED EXPENDITURES THIS REPORT 26. TOTAL NONITEMIZED EXPENDITURES THIS REPORT 27. TOTAL PAID CAMPAIGN WORKERS THIS REPORT (enter amount from line 23) 28. TOTAL EXPENDITURES THIS REPORT (includes lines 25, 26 and 27)

24. ITEMIZED CAMPAIGN EXPENDITURES OVER \$100

Please Type or Print (Use copies of this page as needed)

NOTE: Expenditures Reflected on Lines 25, 26 and 27 Should Be Totaled by Category in Section 20

29. OUTSTANDING CAMPAIGN DEBTS (including unpaid loans) To Be Completed On Candidate's Final Report For An Election

Please Type or Print

Use additional pages if necessary

NAME AND ADDRESS OF CREDITOR	DESCRIPTION OF DEBT	CURRENT BALANCE
	30. TOTAL DEBT	