COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES
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24-HOUR REPORT OF CONTRIBUTIONS AND EXPENDITURES

For Political Action Committees, Ballot Question Committees and Political Party Committees

COMMITTEE INFORMATION	
Name of Committee:	Phone:
Mailing Address (City, State, Zip Code):	

TREASURER INFORMATION	
Name of Treasurer:	Phone:
Mailing Address (City, State, Zip Code):	

FILING SCHEDULE FOR 2016

Election	Election Date	Reporting Period
Primary Election	June 14, 2016	June 1 — June 13, 2016
General Election	November 8, 2016	October 26 — November 7, 2016

WHEN TO FILE	WHAT CONTRIBUTIONS SHOULD BE REPORTED	WHAT EXPENDITURES SHOULD BE REPORTED
Within 24 hours, including Saturdays and Sundays, of receiving the contribution or making the expenditure, incurring the obligation, or placing the order. Reports can be filed via the committee's electronic filing website.	Any single contribution of $5,000 or more received during the reporting period.	Any single expenditure of $1,000 or more made during the reporting period. Orders placed with or obligations made to vendors for goods or services are considered expenditures at the time the orders or obligations are made. Overhead costs, such as rent, taxes, utilities and some salary payments are not required to be reported.

IMPORTANT REMINDERS

The information contained in this report must also be included on the appropriate schedule of the next regularly scheduled campaign finance report.

If an expenditure is disclosed in an independent expenditure report, it is not necessary to file a separate 24-hour report for the same expenditure.

CONTRIBUTIONS OF $5,000 OR MORE	
Contributor Name:	Date of Contribution:
Address:	Amount of Contribution: $
City, State, Zip Code:	
Occupation:	Employer:
Contributor Name:	Date of Contribution:
Address:	Amount of Contribution: $
City, State, Zip Code :	
Occupation:	Employer:

EXPENDITURES OF $1,000 OR MORE	
Payee/Creditor:	Date of Expenditure:
Address:	Amount of Expenditure: $
City, State, Zip Code:	
Purpose of Expenditure:	
Expenditure made on behalf of (name of candidate or ballot question):	☐ Support ☐ Oppose
Payee/Creditor:	Date of Expenditure:
Address:	Amount of Expenditure: $
City, State, Zip Code:	
Purpose of Expenditure:	
Expenditure made on behalf of (name of candidate or ballot question):	☐ Support ☐ Oppose

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

Signature of Treasurer _____ Date _____

Duplicate as needed.