

2ND GENERAL CAMPAIGN REPORTING STATEMENT

NAME:

FILING DEADLINE: June 13th by 4:30 p.m.

**Candidates who fail to file their
Campaign Reporting Statement by the
deadline will be assessed a fine of \$500.**

Please see the Osage Nation Election Board Rules and Regulations, Rule Two, Campaign Finance Reporting for requirements.

If you have any questions or need help filling out the Campaign Reporting Statement, please contact the Election Office by emailing electionoffice@osagenation-nsn.gov or calling toll free at (877) 560-5286.

I attest that the attached information is a true and accurate representation of the financial reporting for my campaign.

Candidate Signature

Date

FOR ELECTION OFFICE USE ONLY

2ND GENERAL CAMPAIGN REPORTING STATEMENT

NAME:

SECTION 1A. CANDIDATE/SELF DONATIONS

List all donations that the Candidate has contributed to the Candidate's campaign.

DATE	AMOUNT
TOTAL 1	

DATE	AMOUNT
TOTAL 2	

DATE	AMOUNT
TOTAL 3	

TOTAL 1	
TOTAL 2	
TOTAL 3	
GRAND TOTAL	

2ND GENERAL CAMPAIGN REPORTING STATEMENT

NAME:

SECTION 1A. PREVIOUSLY USED CAMPAIGN MATERIALS

List all of the campaign materials being used for the Candidate's campaign that may be remaining from a previous campaign.

CAMPAIGN MATERIALS BEING USED

2ND GENERAL CAMPAIGN REPORTING STATEMENT

NAME: _____

SECTION 1B. INDIVIDUAL MONETARY DONATIONS

List all donations that any individual (not business entities) have contributed to the Candidate's campaign.

DATE	FIRST & LAST NAME	EMPLOYER	AMOUNT
			TOTAL

2ND GENERAL CAMPAIGN REPORTING STATEMENT

NAME: _____

SECTION 1B. INDIVIDUAL MONETARY DONATIONS

List all donations that any individual (not business entities) has contributed to the Candidate's campaign.

DATE	FIRST & LAST NAME	EMPLOYER	AMOUNT
TOTAL			

2ND GENERAL CAMPAIGN REPORTING STATEMENT

NAME: _____

SECTION 1C. INDIVIDUAL IN KIND DONATIONS

List all donations that any individual (not business entities) has contributed to the Candidate's campaign in the form of goods or services. If the exact amount is unknown, estimate.

DATE	FIRST & LAST NAME	GOODS or SERVICES	EMPLOYER	AMOUNT
TOTAL				

2ND GENERAL CAMPAIGN REPORTING STATEMENT

NAME: _____

SECTION 1E. ANONYMOUS/UNIDENTIFIABLE MONETARY DONATIONS

List all donations that the Candidate has received that was anonymous for the Candidate's campaign.

DATE	AMOUNT
TOTAL 1	

DATE	AMOUNT
TOTAL 2	

DATE	AMOUNT
TOTAL 3	

TOTAL 1	
TOTAL 2	
TOTAL 3	
GRAND TOTAL	

2ND GENERAL CAMPAIGN REPORTING STATEMENT

NAME: _____

SECTION 1F. TOTAL DONATIONS

List the totals from each page and add together.

SECTION	AMOUNT
Section 1A. Candidate/Self Donations	
Section 1B. Individual Monetary Donations	
Section 1D. Business Entity Donations	
Section 1E. Anonymous/Unidentifiable Monetary Donations	
TOTAL DONATIONS	
Section 1C. Individual In Kind Donations	

2ND GENERAL CAMPAIGN REPORTING STATEMENT

NAME:

SECTION 2. EXPENDITURES

Including the Filing Fee and other expenses to the Election Office, list all expenditures made for the Candidate's campaign.

DATE	PAID TO	GOOD/SERVICES	AMOUNT
TOTAL			

2ND GENERAL CAMPAIGN REPORTING STATEMENT

NAME: _____

SECTION 3. SUMMARY FORM

REPORTING START DATE _____

REPORTING END DATE _____

SECTION	AMOUNT
Beginning Balance per Bank Documentation	
Total Donations from Section 1F (Do not include Sec. C In Kind.)	
Total Expenditures from Section 2	
Ending Balance per Bank Documentation	

Section 1C. Individual In Kind Donations	
--	--

ATTACH A COPY OF YOUR BANK DOCUMENTATION OR STATEMENT FROM THE REPORTING START DATE TO THE REPORTING END DATE.