CAMPAIGN CONTRIBUTIONS

REPORT PERIOD Number 2

BRADLEY SMITH

Candidate's Name (print) *Office* *District (if applicable)*

Contributions in Excess of $100 or, When Added Together Exceed $100

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	CHECK ✓ IF LOAN	CHECK ✓ IF IN KIND
Office-Bonanza + Lamb IBEW 357	10/24	$500		

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CAMPAIGN CONTRIBUTIONS

REPORT PERIOD Number 2

BRAD SMITH #20

Candidate's Name (print) *Office* *District (if applicable)*

Contributions of $100 or Less

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION

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BRAD SMITH #20

Candidate's Name (print) *Office* *District (if applicable)*

Expenses Categories

CATEGORIES	CODE	TOTALS
Office expenses Copies (office supplies)	A	$250
Expenses related to volunteers (GAS)	B	$100
Expenses related to travel (GAS / FOOD / ROOM)	C	$300
Expenses related to advertising F-J ADS / SIGNS - (wood) + (PAINT)	D	ADS $880.00 + $1250 ADS + 122.50 wood + PAINT
Expenses related to paid staff	E	0
Expenses related to consultants	F	0
Expenses related to polling	G	0
Expenses related to special events	H	0
Goods and services provided in kind for which money would otherwise have been paid	I	0
Other miscellaneous expenses (GAS / FOOD)	J	$350

TOTAL $3120.00
13/22.50
$3242.50

1000
992
1200
3242

CAMPAIGN EXPENSES

REPORT PERIOD Number 2

BRAD SMITH #20

Candidate's Name (print) *Office* *District (if applicable)*

Expenses of $100 or Less

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY
10/8	$60.00	D (PAINT)
10/10	$90.00	D (PAINT)
10/17	$70.00	D (PAINT) (320)
10/20	$60.00	D (PAINT)
10/30	$40.00	D (PAINT)
10/1	$20.00	J (GAS) (350)
10/2	$15.00	J (GAS)
10/2	$15.00	J (GAS)
10/3	$20.00	J (GAS)
10/4	$10.00	J (Food)
10/4	$20.00	J (GAS)
10/6	$20.00	J (GAS) 100
10/6	$20.00	J (Food)
10/7	$25.00	J (Food)
10/10	$25.00	J (GAS)
10/12	$20.00	J (GAS)
10/13	$10.00	J (GAS)
10/15	$25.00	J (Food)
10/17	$10.00	J (Food)
10/19	$20.00	J (GAS)
10/20	$25.00	J (GAS)
10/21	$10.00	J (GAS)
10/22	$20.00	J (GAS) 100
10/23	$20.00	J (GAS)

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY
10/3	$20.00	A Office
10/7	45.00	A " ($250)
10/9	50.00	A "
10/13	75.00	A "
10/20	60.00	A "
10/4	20.00	J
10/8	20.00	J
10/14	20.00	J $100
10/19	20.00	J
10/23	20.00	J
10/14	25.00	C
10/14	30.00	C
10/14	20.00	C
10/14	50.00	C $30
10/15	20.00	C
10/15	20.00	C
10/15	20.00	C
10/22	15.00	C
10/22	50.00	C
10/22	25.00	C
10/22	25.00	C

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BRA SMITH #20

Candidate's Name (print) *Office* *District (if applicable)*

Expenses in Excess of $100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE
R-J	D (Ad)	9/2	$270.00
R-J	D (Ad)	10/3	122.50
R-J	D (Ad)	10/10	122.50
R-J	D (Ad)	10/17	122.50
R-J	D (Ad)	10/24	122.50
R-J	D (Ad)	10/24	245.50
Home Base (930)	D (wood)	10/10	$690.00
Home Base	D (wood)	10/8	$240.00

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930
300
125

490
515.50
1009

992.50
12

930.00
890.00
515.50

122.50
x4
488
490