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2023 24-Hour Report November Ele Report Period:	
CA	NDIDATE INFORMATION
NAME OF CANDIDATE	TELEPHONE NUMBER
MAILING ADDRESS	OFFICE SOUGHT
CITY, ZIP CODE	DISTRICT NUMBER (IF ANY)
NAME OF AUTHORIZED COMMITTEE, IF ANY	<u>'</u>
TRI	EASURER INFORMATION
NAME OF TREASURER	TELEPHONE NUMBER
MAILING ADDRESS	CITY, ZIP CODE
CON	ITRIBUTOR INFORMATION
NAME OF CONTRIBUTOR	OCCUPATION
NUMBER AND STREET	EMPLOYER
CITY, STATE, ZIP CODE	For in-kind contributions received, describe the goods or services received:
DATE OF CONTRIBUTION	
CONTRIBUTION AMOUNT: \$	
IF IN-KIND, REPORT FAIR MARKET VALUE: \$	
EXP	ENDITURE INFORMATION
NAME OF PAYEE	DATE OF EXPENDITURE
NUMBER AND STREET	EXPENDITURE AMOUNT
CITY, STATE, ZIP CODE	
PURPOSE OF EXPENDITURE	
I,	certify that the information in this report is true, correct and complete.
Signature of Treasurer	Date Signature of Candidate Date

INSTRUCTIONS FOR FILING 24 HOUR REPORTS

If between October 25 through November 6, a candidate for state, county or municipal office makes a <u>single</u> expenditure of \$1,000 or more, receives a contribution of \$1,000 or more, or receives a loan from the candidate or candidate's spouse/domestic partner of \$1,000 or more, a 24 Hour Report must be filed.

The report must be filed within 24 hours of making the expenditure or receiving the contribution.

FACSIMILE TRANSMISSION

A properly signed report may be faxed to the Clerk's office, provided the original is received by the Clerk's office within 5 calendar days.

IMPORTANT

The information contained in this report must be included on the appropriate schedule of the 42-Day Post Election Report.

QUESTIONS

Please contact the Clerk's Office.