



**MUNICIPAL CAMPAIGN FINANCIAL DISCLOSURE**

Michael James Geddes

Full name of candidate

9644 Winchester Dr. C.H.

Address

City Council

Name of office

- |  |          |
|--|----------|
| 1. Total contributions<br>(Form "A" total)     | \$ 35.00 |
| 2. Total campaign expenses<br>(Form "B" total) | \$ 35.00 |
| 3. Balance at the end of the reporting period  | \$ 0     |

6/26/19

Date

Signature of Candidate

**received**  
06-26-19 CM



**ITEMIZED CONTRIBUTION REPORT (FORM "A")**

Date Received	Name of Contributor	Complete Mailing Address	Amount of Contribution
5/30/19	Michael Geddes	9644 Winchester Dr C. H.	\$35.00
XXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	TOTAL CONTRIBUTIONS	\$



ITEMIZED EXPENDITURE REPORT (FORM "B")

Date of Expenditure	Person/Organization to Whom Expenditure was made	Purpose of Expenditure	Amount of Expenditure
5/30/19	City of C.H.	Filing Declaration Fee	\$35.00
XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	TOTAL CAMPAIGN EXPENDITURES	\$