



City of Hyattsville, Maryland  
2021 CANDIDATE CAMPAIGN FINANCE REPORT  
CERTIFICATION OF DISPOSITION OF FUNDS

CANDIDATE NAME: MICHAEL BROWN  
TREASURER NAME: JEROME LEWIS  
OFFICE SOUGHT: CITY COUNCIL

This certification is used to close the campaign account after all funds have been properly disbursed. The annual report must be submitted with this certification within 30 days of the disposition of funds or on/before the 1st Tuesday in September (whichever is earlier). The annual report must have a zero balance with no outstanding loans or debts. See Hyattsville City Code, Chapter 8, §8-32(F).

Indicate the Method of Disbursement by Checking Below. Supporting documentation must be submitted with the Annual Report.

- Funds returned, pro rata, to contributors by the Treasurer;
- Paid to a charitable organization registered or exempt from registration pursuant to Maryland Code, Title 6 of the Business Regulation Article, which may be amended from time to time;
- Paid to a local board of education or to a recognized nonprofit organization providing services or funds for the benefit of pupils or teachers; and/or
- Paid to any public or private institution of higher education in the State for scholarship or loan purposes.
- Paid to any public or private institution of higher education in the State for scholarship or loan purposes.

**CANDIDATE CERTIFICATION**

I certify, under the penalty of perjury, that this campaign is closed, and no further contributions or expenditures are anticipated. Upon signing this certification, I declare that all funds have been distributed and reported. In addition, no contributions will be accepted, or disbursements made after the annual report is filed (due within 30 days of the disposition of funds or on/before the 1st Tuesday in September, whichever is earlier) and this form is signed and submitted. I understand that the submission of false, erroneous, or incomplete information may be subject to penalties in accordance with the Hyattsville City Code.

BROWN.MICHAEL.TR  
OY.SR.1283990938

Digitally signed by  
BROWN.MICHAEL.TROY.SR.1283990938  
Date: 2021.06.02 05:59:51 -04'00'

6/2/2021

Signature of Candidate

Date

*Jerome Lewis*

6/2/2021

Signature of Treasurer

Date

**OFFICE USE ONLY**

Date/Time Received:	Staff:
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**City of Hyattsville, Maryland  
2021 - CANDIDATE CAMPAIGN FINANCE REPORT**

**CANDIDATE NAME:** MICHAEL BROWN

**TREASURER NAME:** JEROME LEWIS

**OFFICE SOUGHT:** CITY COUNCIL

**REPORTING PERIOD:** *Start with day following end of last report; end one (1) day before due date. Enter Date as MM/DD/YYYY*

<b>FROM:</b>	<b>5/4/2021</b>	<b>THROUGH:</b>	<b>5/26/2021</b>
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**REPORT TYPE:** *All reports must be filed by 1:00 p.m. of the day they are due.*

<input type="checkbox"/> Initial Report 21st Day before Election	<input type="checkbox"/> Second Report 7th Day before Election	<input type="checkbox"/> Annual Report (1 <sup>st</sup> Tuesday in September)
<input type="checkbox"/> Amended Report (Explain Correction Below)	<input type="checkbox"/> Contribution Threshold Certification	<input checked="" type="checkbox"/> Disposition of Funds Report

**SUMMARY OF REPORT**

1.	Beginning Cash Balance	\$149.19
2.	Contributions Received (Schedule A + B)	0
3.	Initial Loan Balance (including loans to self) (Schedule C) <i>If this is a Disposition of Funds Report, balance must be zero.</i>	0
4.	Expenditures, Loan Payments, and Returned Contributions (Schedule D + E)	\$149.19
5.	Ending Cash Balance (Sum of boxes 1, 2, 3, Minus Box 4) <i>If this is a Disposition of Funds Report, ending balance must be zero.</i>	0

**CANDIDATE CERTIFICATION**

I hereby swear or affirm, under penalty of perjury, that the report filed herewith is, to the best of my knowledge, a complete and full disclosure of all contributions and expenditures. I understand that the submission of false, erroneous, or incomplete information may be subject to penalties in accordance with the Hyattsville City Code.

BROWN.MICHAEL.T ROY.SR.1283990938	<small>Digitally signed by BROWN.MICHAEL.TROY.SR.1283990938 Date: 2021.06.02 05:53:54 -04'00'</small>	6/2/2021	<i>Jerome Lewis</i>	6/2/2021
Signature of Candidate		Date	Signature of Treasurer	Date

**ETHICS COMMISSION CERTIFICATION**

Date/Time Report Received: _____	Staff: _____
Ethics Commission Signature: _____	Date: _____
Print Commissioner Name: _____	