

State of Rhode Island and Providence Plantations

Board of Elections

Campaign Finance Division

50 Branch Avenue, Providence, Rhode Island 02904

Tel. (401)222-2345 Fax (401)222-4424

www.elections.state.ri.us

SUMMARY OF CAMPAIGN ACTIVITY

Name of Candidate, Political Party, Political Action Committee	Key#
ALAN L GORDON	8710

Street Address	City/Town, State and Zip Code
99 HUDSON POND RD	WEST GREENWICH, RI 02817

Mailing Address (if different)	City/Town, State and Zip Code
--------------------------------	-------------------------------

Telephone Number	Daytime Telephone Number	Fax Number	E-mail
(401) 316-2960			JUDGES1412@GMAIL.COM

If Candidate Office Sought: Attorney General	Party Affiliation if any: Unaffiliated
---	---

Reporting Period (Dates):	Period Beginning: 07/01/2018	Period Ending: 10/08/2018
---------------------------	------------------------------	---------------------------

SUMMARY OF ACTIVITY FOR PERIOD

1. Beginning Cash Balance	\$ 0
2. Cash Receipts	
a. Contributions From:	
1. Aggregate	0
a. (Individuals)	0
b. (Political Parties)	0
c. (Political Action Committees)	0
2. Individuals	25.00
3. Political Parties	0
4. Political Action Committees	0
5. Loan Proceeds	330.00
6. Payroll Check off	0
7. Interest Received	0
8. State Check Off	0
9. Refund/Rebate	0
10. Party Building	0
11. Matching Public Funds	0
12. Other	0
13. Returned Contributions	0
14. Returned Checks	0
b. Other:	0
	0
	0
3. Total Cash	355.00
4. Cash Disbursements	
a. Aggregate Expenses	0
b. Campaign Expenses	78.08
c. Repayment of Loans	0
d. Account Payable Repayments	0
e. Other	0

4. Cash Disbursements, continued	
f. Other Disbursements	0
	0
	0
5. Ending Cash Balance	\$ 276.92

CAMPAIGN FUND STATUS

6. Report of In-Kind Contributions	0
7. Cash	\$ 276.92
8. Other Assets	
	0
	0
	0
9. Total Assets	\$ 276.92

LIABILITIES AND FUND BALANCE

10. Liabilities	
a. Accounts Payable	\$ 0
b. Loans Payable	330.00
c. Other Liabilities	
	0
	0
11. Total Liabilities	330.00
12. Total Fund Balance	\$(53.08)
13. Total Liability / Fund Balance	276.92

I HEREBY CERTIFY THAT THIS REPORT OF CAMPAIGN
CONTRIBUTIONS AND EXPENDITURES AND THE SUPPORTING
DOCUMENTS ARE TRUE AND CORRECT.

Name of Person Filing Report

Title of Person Filing Report

Address of Person Filing This Report

X _____
Signature of Person Date

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____

Day of _____ 20 _____

X _____
Notary Public

SCHEDULE OF CONTRIBUTIONS RECEIVED

Key # 8,710	Full Name of Candidate or Committee ALAN L GORDON	Reporting Period From: 07/01/2018 To: 10/08/2018
-----------------------	---	--

Item	Transaction Type Check	Contribution Type Individual	Receipt Date 09/05/2018	Deposit Date 09/05/2018	Contribution Amount 25.00
-------------	----------------------------------	--	-----------------------------------	-----------------------------------	-------------------------------------

In Kind/Other Receipts Description

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	DAVID		MCCOLLUM					
Street Address					Street Address			
36 NARRAGANSETT BLVD								
City			State	Zip	City		State	Zip
PORTSMOUTH			RI					

Item	Transaction Type Loan	Contribution Type Loan Proceeds	Receipt Date 07/01/2018	Deposit Date 07/01/2018	Contribution Amount 50.00
-------------	---------------------------------	---	-----------------------------------	-----------------------------------	-------------------------------------

In Kind/Other Receipts Description

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	ANN		ARMSTRONG					
Street Address					Street Address			
99 HUDSON POND RD								
City			State	Zip	City		State	Zip
WEST GREENWICH			RI					

Item	Transaction Type Loan	Contribution Type Loan Proceeds	Receipt Date 07/27/2018	Deposit Date 07/27/2018	Contribution Amount 30.00
-------------	---------------------------------	---	-----------------------------------	-----------------------------------	-------------------------------------

In Kind/Other Receipts Description

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	ANN		ARMSTRONG					
Street Address					Street Address			
99 HUDSON POND RD								
City			State	Zip	City		State	Zip
WEST GREENWICH			RI					

Item	Transaction Type Loan	Contribution Type Loan Proceeds	Receipt Date 08/29/2018	Deposit Date 08/29/2018	Contribution Amount 250.00
-------------	---------------------------------	---	-----------------------------------	-----------------------------------	--------------------------------------

In Kind/Other Receipts Description

Contributor Information					Employer Data			
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name			
	ANN		ARMSTRONG					
Street Address					Street Address			
99 HUDSON POND RD								
City			State	Zip	City		State	Zip
WEST GREENWICH			RI					

SCHEDULE OF EXPENDITURES

Key #	Full Name of Candidate or Committee	Reporting Period
8,710	ALAN L GORDON	From: 07/01/2018 To: 10/08/2018

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/07/2018		Campaign Expenditure	Advertising	\$12.50

Purpose of Expenditure

VOTER LISTS

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	State	Zip
			SOS	RI	
Street Address			City	State	Zip
WEST RIVER RD			PROVIDENCE	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/29/2018		Campaign Expenditure	Advertising	\$39.36

Purpose of Expenditure

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	State	Zip
			STAPLES	RI	
Street Address			City	State	Zip
			WAKEFIELD	RI	

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/29/2018		Campaign Expenditure	Advertising	\$26.22

Purpose of Expenditure

Payee Information					
Prefix	First Name	MI	LastName or Vendor Name	State	Zip
			STAPLES	RI	
Street Address			City	State	Zip
			NORTH KINGSTOWN	RI	