Spring 2022 Employee Assembly Election

Candidate Expense Report

Seat/Position Sought:	
Candidate Name:	**NetID:**

Please summarize your campaign expenditures below <mark>and include scanned copies of original receipts for all expenses</mark>. We encourage you to have Direct Deposit or Accounts Payable ACH set up through Workday, and if not to please provide your home mailing address in the space below. This form is due to the Office of the Assemblies (assembly@cornell.edu) by Friday, April 29, 2022 at 2:00PM.

Per the Election Guidelines §1.b.c: Maintaining a Fair Environment (lines 42-52):

- Candidates and their supporters may not exceed $50 for out-of-pocket spending and fair market value of donations of materials and professional services. Candidates must submit a Candidate Expenditure Statement Form and all receipts and proof of fair market value to the Office of the Assemblies (assembly@cornell.edu) by the deadline specified on the Elections Calendar. If no money was spent for the campaign, the Candidate Expenditure Statement Form must still be signed and dated showing a statement of zero ($0) spending, and turned in by the deadline.
- Candidates may be reimbursed for up to $50 of allowable campaign expenses. Common allowable campaign expenses include: photocopies from on-campus vendors, domain name fees and web hosting fees. If there is any question, candidates should receive pre-clearance on expenditures to ensure that they are reimbursable. Only expenditures that are submitted on the official candidate expenditure statement form with the original receipt will be reimbursed.

Expense Description	Amount
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
TOTAL EXPENDITURES	$

Campus Address: _____

Home Address (if not using Direct Deposit): _____

Phone number where you may be reached during election period: __(_____)_____

I attest by my signature below that the information I have provided is true and accurate to the best of my knowledge. I understand that ineligible expenses will not be reimbursed, and I may be disqualified.

Signature of candidate_____**Date** _____