

**UFSD OF THE TARRYTOWNS
CANDIDATES FOR MEMBER OF THE BOARD OF EDUCATION
EXPENDITURE & CONTRIBUTION STATEMENT**

This form must be completed, signed, notarized and filed with the District Clerk of the UFSD of the Tarrytowns (Administration Building, 200 North Broadway, Sleepy Hollow, NY 10591). If the total expenditures, including those incurred by others on your behalf, with your approval, exceed \$500 or the aggregate amount of contributions to your campaign exceed \$500, you must also file this statement with the Commissioner of Education of the New York State Education Department (State Education Building, 89 Washington Avenue, Albany, NY 12234).

AFFIDAVIT MUST BE FILED THREE TIMES WITH THE DISTRICT CLERK AS FOLLOWS:

- 1. On or before the 30th day preceding the date of the election (**April 21, 2025**), AND**
- 2. On or before the 5th day preceding the date of the election (**May 15, 2025**), AND**
- 3. Within 20 days following the date of the election (**June 9, 2025**)**

I, _____, am a candidate for member of the Board of Education of the UFSD of the Tarrytowns, at an election to be held on **May 20, 2025**.

Please complete the appropriate statement for each box.

EXPENDITURE STATEMENT

Note: Expenditures include payments for travel expenses, writing, printing and transmission costs of any letter, circular or other publication containing a statement of the position or views of the candidate or person upon public or other questions, stationery, postage, telegraph, telephone and public messenger service.

I HEREBY CERTIFY THAT (check only one):

_____ As of _____ I have expended and/or others have expended on my behalf, with my approval, less than \$500 on my campaign in support of my candidacy for this office.

_____ As of _____ I have expended and/or others have expended on my behalf, with my approval, a total of \$ _____ on my campaign in support of my candidacy for this office. **(If you check this statement, you must complete the back of this form.)**

CONTRIBUTION STATEMENT

I HEREBY CERTIFY THAT (check only one):

_____ As of _____ the aggregate amount of contributions received by my campaign **does not exceed \$500**.

_____ As of _____ the aggregate amount of contributions made by others on my behalf, with my approval, was \$ _____. **(If you check this statement, you must complete the back of this form.)**

Signature of Candidate

Sworn to before me this

_____ day of _____, 2025

Notary Public

NOTE: If you receive a contribution or loan of more than \$1,000 after the filing of the second statement in May, you must report it to both the District Clerk and Commissioner of Education within 24 hours of receipt.

This section must be completed if you (and/or others) **expend more than \$500** on your campaign during any reporting period or if you **receive more than \$500** in campaign contributions during any reporting period.

CAMPAIGN EXPENSES

EXPENSE	DATE EXPENSED	AMOUNT

CONTRIBUTIONS

If contributor is a political committee, include political unit represented, date of receipt, dollar amount of every expenditure as well as name and address of the person to whom it is made.

NAME & ADDRESS OF CONTRIBUTOR	DATE RECEIVED	AMOUNT/ FAIR MARKET VALUE

For contributions of **more than \$1,000 received** after the filing of the second expenditure & contribution statement, the following certification must be completed and notarized.

I, _____, am a candidate for member of the Board of Education of the UFSD of the Tarrytowns, at an election to be held on **May 20, 2025**.

I HEREBY CERTIFY THAT the above listed contribution(s) made by others, on my behalf, with my approval, exceeded \$1,000 and was received after the filing of the second statement in May. This report is being made within 24 hours of receipt of the contribution.

Signature of Candidate

Sworn to before me this
____ day of _____, 2025

Notary Public