



**State of Rhode Island**

**Board of Elections**

Campaign Finance Unit  
2000 Plainfield Pike, Cranston, RI 02921  
Telephone No. (401) 222-2345  
www.elections.ri.gov

**SUMMARY OF BALLOT QUESTION ADVOCACY ACTIVITY (BQA-1)**

Office Time Stamp

Full Name of Ballot Question Advocate

Other Name(s) Under Which Ballot Question Advocacy Conducted

Street Address

City/Town, State and Zip Code

Mailing Address (if different)

City/Town, State and Zip Code

Telephone Number

Daytime Telephone Number

Fax Number

E-mail Address

Name(s) and Address(es) of Endorsing or Member Organizations of This Ballot Question Advocate that have authorized the Ballot Question Advocate to use their name in support of their efforts: (Attach additional list if necessary)

Name

Address

The Question Whose Approval or Rejection the Ballot Question Advocate Intends to Advocate

Ballot Question: \_\_\_\_\_  Approval  Rejection

**Summary of Activity for Reporting Period (see reverse for instructions)**

Reporting Period Beginning Date: \_\_\_\_\_

Original Report

Reporting Period Ending Date: \_\_\_\_\_

Amended Report

Beginning Fund Balance: \$ \_\_\_\_\_

Plus: Total Amount Contributed This Period: \$ \_\_\_\_\_

Minus: Total Amount Expended This Period: (\$ \_\_\_\_\_)

Ending Fund Balance: \$ \_\_\_\_\_

In-Kind Contributions This Period: \$ \_\_\_\_\_

Pursuant to R.I.G.L. 17-25.2-5(a)(1): The Name, Address and, if applicable, the Place of Employment of every person making a contribution(s) that in the aggregate exceed \$1,800 per election cycle to a ballot question advocate for the purpose of ballot question advocacy must be identified.

See attached "Schedule of Contributions For Ballot Advocacy" (Form BQA-2) for Identified Contributions.

Pursuant to R.I.G.L. 17-25.2-5(a)(2): The Name and Address of every person or entity receiving an expenditure for ballot question advocacy, which in the aggregate exceeds \$100, must be identified.

See attached "Schedule of Expenditures For Ballot Advocacy" (Form BQA-3) for Identified Expenditures.

I hereby certify that this report of contributions and expenditures and the supporting documents are complete, true and correct and that I am responsible for its contents and for the ballot question advocate's compliance with the provisions of R.I.G.L. 17-25.2.

\_\_\_\_\_  
Print Name of Person Completing Report/Officer of the Ballot Question Advocate

\_\_\_\_\_  
Title of Person Completing Report/Officer of the Ballot Question Advocate

\_\_\_\_\_  
Address of Person Completing Report/Officer of the Ballot Question Advocate

**X** \_\_\_\_\_ Date  
Signature of Person Completing Report or An Officer of the Ballot Question Advocate

## INSTRUCTIONS

**Full Name of Ballot Question Advocate** – Enter the full name of the Ballot Question Advocate (For purposes of statewide referenda only, any exempt nonprofit as defined in section 17-25-3 or any organization described under section 501(c)(3) of the Internal Revenue Code; and for all other ballot questions, any person making an expenditure with a cumulative total that exceeds one thousand dollars (\$1,000) in a calendar year for ballot question advocacy on a particular ballot question.)

**Other Name(s) Under Which Ballot Advocacy Conducted** - Enter any other name under the ballot question advocate conducts ballot question advocacy.

**Street Address** – Enter the address of the ballot question advocate.

**City/Town, State & Zip Code** – Enter the City/Town, State and Zip Code of the ballot question advocate.

**Mailing Address** – Enter the address where mail is directed to this ballot question advocate, if different from the mailing address.

**City/Town, State and Zip Code** – Enter the City/Town, State and Zip Code where mail is directed to this ballot question advocate, if different from the mailing address.

**Telephone Number** – Enter the telephone number of the ballot question advocate.

**Daytime Telephone Number** – Enter a secondary telephone for the ballot question advocate.

**Fax Number** – Enter the fax number for this ballot question advocate.

**E-mail Address** – Enter the E-mail address for this ballot question advocate.

**Names and Addresses of Endorsing or Member Organizations** – Enter the names and addresses of all identified endorsing or member organizations, corporations, and/or associations that authorize the ballot question advocate to represent to the public that they support the ballot question advocate.

**Question Whose Approval/Rejection the Ballot Question Advocate Intends to Advocate** – Identify the ballot question for which the ballot question advocate intends to advocate and check the appropriate box to indicate whether the advocacy shall be the approval or rejection of said ballot question.

**Original Report** – Check this box if the report being filed is the initial report for this Reporting Period.

**Amended Report** – Check this box if the report being filed contains changes from the initial report for this Reporting Period.

**Reporting Period Beginning Date** – Enter the first date of the reporting period.

**Reporting Period Ending Date** – Enter the last date of the reporting period.

The first report must be filed for the period beginning when the ballot question advocate expends a cumulative total that exceeds one thousand dollars (\$1,000) for the ballot question advocacy and ending the last day of the first full month following such date, to be filed with the Board of Elections due no later than seven (7) days after the end of the month. Reports must be filed thereafter for each calendar month due no later than seven (7) days after the end of each month; provided that in lieu of filing for the last full calendar month preceding the ballot question election, a report must be filed due no later than seven (7) days before the election. A final report must be filed no later than thirty (30) days after the election.

**Beginning Fund Balance:** - Enter the amount of total funds this Ballot Question Advocate has as of the first date of the reporting period. Note: This amount should be the same amount as the Ending Fund Balance reported on this advocate's last filed report.

**Total Amount Contributed This Period** – Enter the total amount contributed by each person or source, excluding in-kind contributions, to this ballot question advocate in this reporting period. Contributions, including in-kind, received in excess of one thousand eight hundred dollars (\$1,800) in aggregate from any person per election cycle must also be disclosed on a "Schedule of Contributions For Ballot Advocacy" (Form BQA-2) and should be so noted by checking the appropriate box.

**Total Amount Expended This Period** – Enter the total amount expended by this ballot question advocate in this reporting period. Expenditures made in excess of one hundred dollars (\$100) in aggregate to any person or entity must also be disclosed on a "Schedule of Expenditures For Ballot Advocacy" (Form BQA-3) and should be so noted by checking the appropriate box.

**Ending Fund Balance:** - Enter the total of (Beginning Fund Balance + Total Contributions This Period) – Total Expenditures This Period.

**In-Kind Contributions This Period:**- Enter the monetary value of other things of value or paid personal services donated to the Ballot Question Advocate, except for newsletters and other communications paid for and transmitted by the advocate to its own members and not to the general public.

**Name/Title of Person Completing Report** – The individual completing this report must affix his or her signature, thereby certifying this report of contributions and expenditures and the supporting documents is complete, true and accurate and who shall be responsible for its contents.

**If you have any questions on how to complete this form, please contact the Board of Elections.**

**PENALTIES:** Any person violating the provisions of the Rhode Island Ballot Advocacy and Reporting Act (Chapter 25.2 of Title 17 of the Rhode Island General Laws) shall be subject to penalties.