



State of Rhode Island

Board of Elections

Campaign Finance Unit
2000 Plainfield Pike, Cranston, RI 02921
Tel. (401) 222-2345
www.elections.ri.gov

ACCOUNT CERTIFICATION (CF-9)

Time Stamp
(For Office Use Only)

Name of Candidate or Political Action Committee (PAC)			Key #
Candidate or PAC Address		City/Town, State and Zip Code	
Candidate or PAC Mailing Address (if different)		City/Town, State and Zip Code	
Telephone Number	Daytime Telephone Number	Fax Number	E-mail Address

Pursuant to R.I.G.L. 17-25-11.2(a): Whenever a campaign account containing campaign funds received and expended by a candidate, office holder, or treasurer...receives or expends at least \$10,000 in any year, the account shall require the appointment of a treasurer or deputy treasurer, who shall be a person other than the candidate. For such accounts, a candidate may remain as either treasurer or deputy treasurer on his or her campaign account; provided, the treasurer or deputy treasurer who is not the candidate shall examine all campaign account records and shall certify to the substantial accuracy of the campaign finance report at the time of filing with the board of elections. The provisions of this section as to examination and certification shall be applicable to political action committees.

CERTIFICATION

I, _____, in my capacity as (choose one) treasurer, deputy treasurer
Print Name

for the candidate or political action committee (PAC) named above, have examined all campaign records and certify to the substantial accuracy of the campaign finance report designated below:

Reporting Period (choose one):

- | | | |
|--|---|--|
| <input type="checkbox"/> 1 st Quarter (01/01-03/31) | <input type="checkbox"/> 28 Days Before Primary | <input type="checkbox"/> 28 Days Before Election |
| <input type="checkbox"/> 2 nd Quarter (04/01-06/30) | <input type="checkbox"/> 7 Days Before Primary | <input type="checkbox"/> 7 Days Before Election |
| <input type="checkbox"/> 3 rd Quarter (07/01-09/30) | <input type="checkbox"/> 28 Days After Primary | <input type="checkbox"/> 28 Days After Election |
| <input type="checkbox"/> 4 th Quarter (10/01-12/31) | <input type="checkbox"/> Other: _____ | |

x _____ Signature of treasurer/deputy treasurer	_____ Date	Subscribed and sworn before me this ____ day of _____ 20__ x _____ Notary Public
--	---------------	--

Penalties: Any person violating the provisions of the Rhode Island Campaign Contributions and Expenditures Reporting Act (Chapter 25 of Title 17 of the Rhode Island General Laws) including the reporting, examination and certification set forth above shall be subject to the civil and criminal penalty provisions therein.