

Form ED - Mf

Name of political party/independent representative/representative of national minority/independent member of representative body of local and regional self-government unit/independent slate/candidate_____

Page number _____

Place of seat/permanent or temporary address/address_____

OIB of political party/independent representative/representative of national minority/independent member of representative body of local or regional self-government unit/independent slate/candidate_____

RECORD ON RECEIVED DONATIONS IN MONIES FROM PERMITTED SOURCES FROM NATURAL PERSONS

in ____ month _____ year

No.	Name and surname of donor	Address of donor	OIB/passport number of donor	Date of payment of donation	Amount of paid donation	Prescribed amount of donation (Article 11 of the Act)	Total amount of paid donation (cumulative)	Amount of donation exceeding the amount from Article 11 of the Act	Notes
1	2	3	4	5	6	7	8	9 (8-7)	10
TOTAL									

(place and date)

(stamp and signature of responsible person)

Name of political party/independent representative/representative of a national minority/independent member of a representative body of local or regional self-government units/independent slate/candidate _____

Page number _____

Place of seat/permanent or temporary address/address _____

OIB of political party/independent representative/representative of national minority/independent member of representative body of local or regional self-government unit/independent slate/candidate _____

RECORD OF RECEIVED DONATIONS IN MONIES FROM PERMITTED SOURCES FROM LEGAL PERSONS
in _____ month _____ year

No.	Name of donor	Address of donor	OIB/OIB of foreign person donor	Date of payment of donation	Amount of paid donation	Prescribed amount of donation (Article 11 of the Act)	Total amount of paid donation (cumulative)	Amount of donation exceeding amount from Article 11 of the Act	Notes
1	2	3	4	5	6	7	8	9 (8-7)	10
TOTAL									

(place and date)

(stamp and signature of responsible person)

Form EDN - Mf

Name of political party/independent representative/national minority representative/independent member of representative body of local or regional self-government unit/independent slate/candidate _____

Page number _____

Place of seat/permanent or temporary address/address _____

OIB of political party/independent representative/national minority representative/independent member of representative body of local and regional self-government unit/independent slate/candidate _____

**RECORDS OF RECEIVED DONATIONS IN THE FORM OF PRODUCTS OR SERVICES FROM PERMITTED SOURCES
FROM NATURAL PERSONS in month year**

No.	Name and surname of donor	Address of donor	OIB/passport number of donor	Number and date of invoice	Description of donation	Date of receipt of donation	Value of donation	Prescribed amount of donation (Article 11 of the Act)	Total market value of donated products and/or services (cumulative)	Amount of donation exceeding amount from Article 11 of the Act	Notes
1	2	3	4	5	6	7	8	9	10	11 (10-9)	12
TOTAL											

(place and date)

(stamp and signature of responsible person)

Form EDN - Mp

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Page number _____

Place of seat/permanent or temporary address/address _____

OIB of political party/independent representative/national minority representative/independent member of representative body of local and regional self-government unit/independent slate/candidate _____

**RECORD ON RECEIVED DONATIONS IN THE FORM OF PRODUCTS OR SERVICES FROM PERMITTED SOURCES FROM
LEGAL PERSONS in month year**

No.	Name of donor	Address of donor	OIB/OIB of foreign donor	Number and date of invoice	Description of donation	Date of issuance of donation	Value of donation	Prescribed amount of donation (Article 11 of the Act)	Total market value of donated products and/or services (cumulative)	Amount of donation exceeding the amount from Article 11 of the Act	Notes
1	2	3	4	5	6	7	8	9	10	11 (10-9)	12
TOTAL											

(place and date)

(stamp and signature of responsible person)

Form EZD - Mf

Name of political party/independent representative/national minority representative/independent member of representative body of local or regional self-government unit/independent slate/candidate _____

Page number _____

Place of seat/permanent or temporary address/address _____

OIB of political party/independent representative/national minority representative/independent member of representative body of local and regional self-government unit/independent slate/candidate _____

RECORD ON RECEIVED DONATIONS IN MONIES FROM PROHIBITED SOURCES FROM NATURAL PERSONS
in ____ month _____ year

No.	Name and surname of donor	Address of donor	OIB/passport number of donor	Date of payment of donation	Amount of donation from prohibited sources pursuant to Article 22 of the Act			Notes
					From anonymous sources	From other prohibited sources	Total from prohibited sources	
1	2	3	4	5	6	7	8 (6+7)	9
TOTAL								

(place and date)

(stamp and signature of responsible person)

Form EZD - Mp

Name of political party/independent representative/national minority representative/independent member of representative body of local or regional self-government unit/independent slate/candidate _____

Page number _____

Place of seat/permanent or temporary address/address _____

OIB of political party/independent representative/national minority representative/independent member of representative body of local and regional self-government unit/independent slate/candidate _____

RECORD ON RECEIVED DONATIONS IN MONIES FROM PROHIBITED SOURCES FROM LEGAL PERSONS
in ____ month _____ year

No.	Name of donor	Address of donor	OIB/OIB of foreign donor	Date of payment of donation	Amount of donation from prohibited sources pursuant to Article 22 of the Act			Notes
					From anonymous sources	For other prohibited sources	Total from prohibited sources	
1	2	3	4	5	6	7	8 (6+7)	9
TOTAL								

(place and date)

(stamp and signature of responsible person)

Form EZDN - Mf

Name of political party/independent representative/national minority representative/independent member of representative body of local or regional self-government unit/independent slate/candidate _____

Page number _____

Place of seat/permanent or temporary address/address _____

OIB of political party/independent representative/national minority representative/independent member of representative body of local and regional self-government unit/independent slate/candidate _____

RECORD ON RECEIVED DONATIONS IN THE FORM OF PRODUCTS OR SERVICES FROM PROHIBITED SOURCES FROM LEGAL PERSONS

in _____ month _____ year

No.	Name and surname of donor	Address of donor	OIB/passport number of donor	Number and date of invoice	Description of donation	Date of receipt of donation	Amount of donation from prohibited sources pursuant to Article 22 of the Act			Notes
							From anonymous sources	From other prohibited sources	Total from prohibited sources	
1	2	3	4	5	6	7	8	9	10 (8+9)	11
TOTAL										

(place and date)

(stamp and signature of responsible person)

Form EZDN - Mp

Name of political party/independent representative/national minority representative/independent member of representative body of local or regional self-government unit/independent slate/candidate _____

Page number _____

Place of seat/permanent or temporary address/address _____

OIB of political party/independent representative/national minority representative/independent member of representative body of local and regional self-government unit/independent slate/candidate _____

RECORD ON RECEIVED DONATIONS IN THE FORM OF PRODUCTS OR SERVICES FROM PROHIBITED SOURCES FROM LEGAL PERSONS

in _____ month _____ year

No.	Name of donor	Address of donor	OIB/OIB of foreign donor	Number and date of invoice	Description of donation	Date of receipt of donation	Amount of donation from prohibited sources pursuant to Article 22 of the Act			Notes
							From anonymous sources	From other prohibited sources	Total from prohibited sources	
1	2	3	4	5	6	7	8	9	10 (8+9)	11
TOTAL										

(place and date)

(stamp and signatuer of responsible person)

Form ED - Gfp

Name of political party/independent representative/national minority representative/independent member of representative body of local or regional self-government unit/independent slate/candidate _____

Page number _____

Place of seat/permanent or temporary address/address _____

OIB of political party/independent representative/national minority representative/independent member of representative body of local and regional self-government unit/independent slate/candidate _____

**RECORD OF RECEIVED DONATIONS FROM PERMITTED SOURCES FROM NATURAL AND LEGAL PERSONS
in the period from 1 January to 31 December __ __ year**

No.	Month	Natural person – prescribed amount of donation (Article 11 of the Act)			Legal persons – prescribed amount of donation (Article 11 of the Act)			Total amount of donation prescribed by Article 11 of the Act	Total amount of donation in market value of donated products and/or services exceeding the amount from Article 11 of the Act	Notes
		Amount in monies	Market value of donated products and/or services	Total	Amount in monies	Market value of donated products and/or services	Total			
1	2	3	4	5 (3+4)	6	7	8 (6+7)	9 (5+8)	10	11
1.	January									
2.	February									
3.	March									
4.	April									
5.	May									
6.	June									
7.	July									
8.	August									
9.	September									
10.	October									
11.	November									
12.	December									
TOTAL										

(place and date)

(stamp and signature of responsible person)

Form EZD - Gfp

Name of political party/independent representative/national minority representative/independent member of representative body of local or regional self-government unit/independent slate/candidate _____

Page number _____

Place of seat/permanent or temporary address/address _____

OIB of political party/independent representative/national minority representative/independent member of representative body of local and regional self-government unit/independent slate/candidate _____

**RECORD OF RECEIVED DONATIONS FROM PROHIBITED SOURCES FROM NATURAL AND LEGAL PERSONS
in the period from 1 January to 31 December _____ year**

No.	Month	Natural persons			Legal persons			Total	Notes
		Amount of donation from prohibited sources pursuant to Article 22 of the Act			Amount of donation from prohibited sources pursuant to Article 22 of the Act				
		From anonymous sources	From other prohibited sources	Total from prohibited sources	From anonymous sources	From other prohibited sources	Total from prohibited sources		
1	2	3	4	5	6	7	8	9	10
				(3+4)			(6+7)	(5+8)	
1.	January								
2.	February								
3.	March								
4.	April								
5.	May								
6.	June								
7.	July								
8.	August								
9.	September								
10.	October								
11.	November								
12.	December								
TOTAL									

(place and date)

(stamp and signature of responsible person)

Name of political party _____

Page number _____

Place of seat/address _____

OIB of political party _____

RECORD ON RECEIVED MEMBERSHIP FEES

in _____ month _____ year

No.	Name and surname of payee of membership fees	Address of payee of membership fees	OIB of payee of membership fees	Date of payment of membership fees	Amount of paid membership fees		Notes
					In cash	In gyro account	
1	2	3	4	5	6	7	8
TOTAL							

(place and date)

(stamp and signature of responsible person)

Name of political party _____

Page number _____

Place of seat/address _____

OIB of political party _____

RECORD ON PAID MEMBERSHIP FEES

in the period from 1 January to 31 December _____.year

No.	Month	Total amount of paid membership fees		Notes
		In cash	In gyro account	
1	2	3	4	5
1.	January			
2.	February			
3.	March			
4.	April			
5.	May			
6.	June			
7.	July			
8.	August			
9.	September			
10.	October			
11.	November			
12.	December			
TOTAL				

(place and date)

(stamp and signature of responsible person)

CONFIRMATION OF RECEIPT OF DONATION NO.

(name, address of seat/permanent or temporary address of political party/independent representative/representative of national minority/independent member of a representative body of local and regional self-government units/independent slate/candidate, OIB of political party/independent representative/ representative of national minority/independent member of a representative body of local and regional self-government units/independent slate/candidate receiving donation) received from _____

(name and surname/name, permanent or temporary address/seat of donor, OIB/passport number)

the following donation _____

(type and description of donation)

Donation in the amount of _ _____ kuna, and received on this date _____.

In _____ , _____ year _____

(stamp and signature of responsible person)

CONFIRMATION OF RECEIPT OF MEMBERSHIP FEE NO.

(name, address of seat and OIB of political party receiving membership fee)

received from _____

(name and surname, permanent or temporary address, OIB of member of political party – payee of membership fee)

membership fee in the amount of _kuna on this date_____ .

In _____ , _____ year _____

(stamp and signature of responsible person)

Name of political party/two or more political parties/independent slate leader/candidate _____
 Page number ____
 Place of seat/temporary or permanent address/address _____
 OIB of political party/independent slate leader/candidate _____
 Number of separate account for financing the election campaign _____

REPORT ON RECEIVED DONATIONS FOR THE FINANCING OF ELECTION CAMPAIGNS
in the period from _____ to _____

Natural person donors									Legal person donors								Total
No.	Name and surname	Address	OIB	Date of payment of donation/donation of products and/or services without charge	Value of donation				Name	Seat	OIB	Date of payment of donation/donation of products and/or provision of services without charge	Value of donation				
					Amount in monies	Market value of donated products and/or services	Total	Donation received by political party and paid to its proposed candidate					Amount in monies	Market value of donated products and/or services	Total	Donation received by political party and paid to its proposed candidate	
1	2	3	4	5	6	7	8 (6+7)	9	10	11	12	13	14	15	16 (14+15)	17	18 (8+16)
TOTAL									TOTAL								
LEGALLY PERMITTED TOTAL AMOUNT OF COSTS OF ELECTION CAMPAIGN PURSUANT TO ARTICLE 17, PARAGRAPH 1 OF THE ACT																	
DIFFERENCE FOR REFUND TO PAYEES																	

(place and date) (stamp/stamp and signature/signature of responsible person/responsible person)

Confirmation of receipt of competent electoral committee

Note: Columns 9 and 17 are filled in by candidates for President of the Republic of Croatia, and candidates for municipal heads, mayors, county prefects and mayor of the City of Zagreb who are proposed by a political party. In the case the political party pays financial resources for the financing of the election campaign into a separate account of its proposed candidate, the Report of the candidate proposed by the political party contains data on the total amount of the donation paid by natural/legal persons into the separate account of the candidate proposed by a political party as specified pursuant to Article 24, paragraph 3 of the Act and separately listed data on donations of natural/legal persons received by the political party and forwarded to the separate account of its proposed candidate, as specified in Article 24, paragraph 3 of the Act.

Name of political party/two or more political parties/independent slate leader/candidate _____

Page number ____

Place of seat/permanent or temporary address/address _____

OIB of political party/independent slate leader/candidate _____

Number of separate account for financing the election campaign _____ : _

REPORT ON COSTS (EXPENDITURES) OF THE ELECTION

CAMPAIGN in the period from _____ to _____

No.	Purpose of expense	Name of recipient	Address of recipient (supplier)	OIB of recipient (supplier)	Number and date of invoice/contract	Date of payment/use of product and/or service	Amount		
							Amount in monies	Market value of product and/or services	Total
1	2	3	4	5	6	7	8	9	10
TOTAL									

(place and date)

(stamp/stamp and signature/signature of responsible person/responsible person)

Confirmation of receipt by competent electoral committee

Form FIN-IZVJ

**FINANCIAL REPORT ON FINANCING OF ELECTION
CAMPAIGNS**

for the period from _____ to _____

OIB of the political party/two or more political parties/independent
slate leader/candidate:

Name of political party/ two or more political parties/independent
slate leader/candidate:

Postal code:

Place of seat/permanent or temporary address:

Separate account: _____

Amount in kuna without lipa

Account from account plan	DESCRIPTION	AOP	AMOU NT
1	2	3	4
1.	REVENUES (AOP 002+ 003+ 008)	001	
1.1.	Own revenues	002	
1.2.	Revenues from donations (AOP 004+ 005+ 006+ 007)	003	
1.2.1.	From legal persons in monies	004	
1.2.2.	From legal persons in the form of products or services	005	
1.2.3.	From natural persons in monies	006	
1.2.4.	From natural persons in the form of products or services	007	
1.3.	Other revenues	008	
2.	EXPENDITURES (AOP 010+ 011+ 015+ 019)	009	
2.2.	Material expenditures (AOP 012+ 013+ 014)	011	
2.2.1.	Official travel	012	
2.2.2.	Compensation for volunteer expenses	013	
2.2.3.	Other expenditures	014	
2.3.	Expenditures for services (AOP 016+ 017+ 018)	015	
2.3.1.	Promotion and information services	016	
2.3.2.	Intellectual and personal services	017	
2.3.3.	Other services	018	
2.4.	Other expenditures	019	
	SURPLUS REVENUES (AOP 001-009)	020	
	DEFICIT REVENUES (AOP 009-001)	021	

Signature of responsible person of the
political party/independent slate leader/
candidate:

Stamp/stamp of political party/political
parties:

Contact person:

Contact telephone:

Fax:

E-mail:

Place and date of compiling Report:

Confirmation of receipt by competent electoral committee: