

Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

Massachusetts	
ile with: ity or Town Clerk or Election Commission Please print or type all in	formation, except signatures.
Fill in dates: Month Date Y Reporting Period Beginning	ear Month Date Year Ending
Type of report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding elections.	on 30 day after election year-end report dissolution
Am Niver	
Full Name of Candidate (if applicable) When I S Show Committee	Committee Name
Office Sought and District	Name of Committee Treasurer
Residential Address	Committee Mailing Address
Tel. No. (optional)	Tel. No. (optional)
Line 1: Ending balance from pro Line 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this y Line 5: Ending balance (line 3 minus Line 6: Total in-kind contribution Line 7: Total (all) outstanding liab Line 8: Name of bank(s) used Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and	d (page 2, line 11) speriod (page 3, line 14) st line 4) st this period (page 4) st lit is, to the best of my knowledge and belief, a true and complete statement of all anditures, disbursements, in-kind contributions and liabilities for this reporting period the authority or on behalf of this committee in accordance with the requirements of
Treasurer's signature (in ink)	Date .
FOR CANDIDATE FILINGS O	NLY: (CANDIDATE MUST SIGN BELOW)
campaign finance activity, of all persons acting under the authority or of have not received any contributions, incurred any liabilities nor made any of Candidate without Committee OR Candidate with independent action of the certify that I have examined this report including attached schedules and committee figures activity, including contributions learns receipts expending	d it is, to the best of my knowledge and behet, a true and complete statement of an a behalf of this committee in accordance with the requirements of M.G.L. c. 55. I expenditures on my behalf during this reporting period. With filing separate report d it is, to the best of my knowledge and belief, a true and complete statement of all ditures, disbursements, in-kind contributions and liabilities for this reporting period the authority or on behalf of this committee in accordance with the requirements of

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

umber on e Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more	
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- 10					
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	Total receipts in excess of \$50 (or listed above)		:		
<u>-</u>	Total receipts \$50 and under* (not listed above)				
Line 11: 7	TOTAL RECEIPTS IN THE PERIOD		! .	Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Page 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	•			
		·		
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·	·			
·				
	•			
				-
			Expenditures over \$50	
		Line 13:	Expenditures \$50 and under*	
E	inter on page 1, line 4	Line 14:	TOTAL EXPENDITURES	

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 3

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			-	
		•		
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	`
	Enter on page 1, line 6	Line 17: Total In-kind		

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address Purpose	Amount
-	·		
			·
-			
	Enter on page 1, line 7	Line 18: OUTSTANDING LIABILITIES (ALL)	

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

Page 4