

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election	on Commission
Fill in Reporting Period dates: Beginning Date: CITY CLERKIO CHARLES.	16/21 Ending Date: 12/31/21	
Type of Report: (Check one)		
8th day preceding preliminary 8th day preceding election	30 day after election year-end report diss	solution
Candidate Full Name (if applicable) Councillo at Large Salem Office Sought and District 28A Federal St. #2 Salem Mf1 01970 Residential Address E-mail: 4 Camerkle yahoe. Com Phone # (optional):	Committee to Elect Alice Me Brenda Kissane Name of Committee Treasurer 28A Federal H + 2 Salem My Committee Mailing Address E-mail: brenda.a. Kissane & gr Phone # (optional):	
SUMMARY BALANCI	E INFORMATION:	
Line 1: Ending Balance from previous report	508.20	
Line 2: Total receipts this period (page 3, line 11)	2,005.00	
Line 3: Subtotal (line 1 plus line 2)	2,513.20	
Line 4: Total expenditures this period (page 5, line	14) 2,414.62	
Line 5: Ending Balance (line 3 minus line 4)	98.58	
Line 6: Total in-kind contributions this period (pag	ge 6) 193.04	
Line 7: Total (all) outstanding liabilities (page 7)	1,450.00	
Line 8: Name of bank(s) used: Easten B	ank, formerly Century Bank, So	alem
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind confinance activity of all persons acting under the authority on result of his committee in a Signed under the penalties of perjury:	ontributions and liabilities for this reporting period and represents the camp	paign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	only)	
Candidate with Committee Lettify that I have examined this report including attached schedules and it is, to the bactivity, of all persons acting under the authority or on behalf of this committee in accommittee any liabilities nor made any expenditures on my behalf during this reporting p	ordance with the requirements of M.G.L. c. 55. I have not received any co	
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the befinance activity, including contributions, loans, receipts, expenditures, disbursements, is campaign finance activity of all persons acting under the authority or on behalf of this	in-kind contributions and liabilities for this reporting period and represent	
Signed under the penalties of perjury:	(Candidate's signature) Date: 1/4/2	22

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.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

report all receipts. Please include your committee name and a page number on each page.)				
Data Bassina	Name and Residential Address	Amount	Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
1 whole	LIZ BENNETT	\$t		
11/5/21	63 Conselyea St. Brooklyn W	\$50-		
1/	Both Bernhurdt			
11/7/21	263 High St. Windhester MA 01890	#50-		
	Winchester /1171 01890			
1 /2 -/-	Julie Curtis	# 1		
10/25/21	85 Locust St Danvers MA 01923	#100-		
1 1	Alice Merkl	\$1,750 - Candidat	Pravo Teacher,	
10/16/21	28A Federal St, #2 Sale n MA 01970	Candidat	Pravoteacher Selfemploged	
11/15/21	Alice Merkl 29A Federal St #2 Salem MA 01970	445-		
11/10/20	Salem MA 01970			
	Loci Stewart	ler.		
11/7/21	7 Barnes Rd. Salem MA	#10-		
	Tournes Rec. Sacette			
Line 9: Total Recei	pts over \$50 (or listed above)	2,005.00		
Time 10: Tr. 4 1 P	050			
Line 10: Total Rece	ipts \$50 and under* (not listed above)			
Line 11: TOTAL R	RECEIPTS IN THE PERIOD	2,005.00	← Enter on page 1, line 2	
			d include only those receipts not itemized above.	

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

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
12/31/21	ActBlue	366 Summer st Somerville, MA 02144	Fees for Contributions 10/16/21-12/31/21	#8.40
10/31/21	Alica Merkl	28A Federal St#2 Salem MA 01970	Candidate Loan Reimbursement	* 300-
10/18/21	Thrifteo Printing	56 Pulaski st Reabody MA 01960	Balance due for Mailer	#2,106.22
Line 12: Expenditures over \$50 (or listed above)			2,414.62	
Line 13: Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD * If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized				

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

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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
10/16/21	Brenda Kissane	28A Federal St,#2 Salem, MA 01970		193.04
		Line 15: In-Kind Contributions over \$50 (or listed above)		
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	→ Line 17: TOTAL IN-KIND CONTRIBUTIONS		

^{*} 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.

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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
10/16/21	Alice Merkl Candidate loan	28A Federal St#2 Salem MA 01970	Cavdidate Loan	\$1,750.0
				-#300 - Candidate
				Reimbusen 16/31/21
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	ING LIABILITIES (ALL)	\$1450.0