



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2019 SEP -5 AM 8:07

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: CITY CLERK SALEM, MASS. Beginning Date: 1-1-2019 Ending Date: 8-30-2019

Type of Report: (Check one)

☒ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Arthur C. Sargent III  
Candidate Full Name (if applicable)  
Councillor-at-Large  
Office Sought and District  
8 Maple Avenue Salem MA.  
Residential Address  
E-mail: Sargeatlarge74@aol.com  
Phone # (optional): 978-745-1055

The committee to elect Arthur C. Sargent - Councillor at Large  
Committee Name  
Kathleen M. Sargent  
Name of Committee Treasurer  
8 MAPLE AVENUE  
Committee Mailing Address  
E-mail: Kfranc3@aol.com  
Phone # (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>104.98</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>104.98</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>104.98</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0.00</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>\$11,300.00</u>
Line 8: Name of bank(s) used:	<u>T. D. BANK</u>

### Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Kathleen M. Sargent (Treasurer's signature) Date: 9/4/19

### FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

#### Candidate with Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

#### Candidate without Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Arthur C. Sargent III (Candidate's signature) Date: 9/4/2019

## 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.)

[illegible]**Line 9: Total Receipts over \$50 (or listed above)**

0-60

**Line 10: Total Receipts \$50 and under\* (not listed above)**

0-00

**Line 11: TOTAL RECEIPTS IN THE PERIOD**

0-00

← 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.**

## 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				0.00
Line 16: In-kind \$50 and under				0.00
Line 17: Total In-kind				0.00

Enter on page 1, line 6

\* 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
8-6-99	Arthur C. Sargent	8 Maple Ave Salem	Candidate Loan	\$1,000.00
8-31-99	Arthur C. Sargent	8 Maple Ave	Candidate Loan	500.00
9-3-99	Arthur C. Sargent	8 Maple Ave	Candidate Loan	500.00
10-22-99	Arthur C. Sargent	8 Maple Ave	Candidate Loan	500.00
10-26-99	Arthur C. Sargent	8 Maple Ave	Candidate Loan	1,500.00
10-26-99	Arthur C. Sargent	8 Maple Ave	Candidate Loan	1,000.00
9-6-01	Arthur C. Sargent	8 Maple Ave.	Candidate Loan	1,000.00
9-5-03	Arthur C. Sargent	8 Maple Ave	Candidate Loan	1,000.00
10-27-03	Arthur C. Sargent	8 Maple Ave	Candidate Loan	1,500.00
Line 18: OUTSTANDING LIABILITIES (ALL)				\$8,500.00

Enter on page 1, line 7

Continued  
on Page # 3

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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				0.00
Line 16: In-kind \$50 and under				0.00
Line 17: Total In-kind				0.00

Enter on page 1, line 6

\* 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
10/26/15	Arthur C. Sargent	8 Maple Avenue Salem	Candidate Loan	\$1,600.00
8/24/17	Arthur C. Sargent	8 Maple Avenue Salem	Candidate Loan	\$900.00
11/10/17	Arthur C. Sargent	8 Maple Avenue Salem	Candidate Loan	\$300.00
Line 18: OUTSTANDING LIABILITIES (ALL)				\$11,300.00 KMS

Enter on page 1, line 7