



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2015 OCT 17 AM 8:58

CITY CLERK
SALEM, MASS.

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning Month 1 Date 1 Year 2016 Ending Month 12 Date 31 Year 2016

Type of report: (Check one)

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

Stephen G. Dibble

Full Name of Candidate (if applicable)

Ward 7 City Councilor

Office Sought and District

74 Moffatt Rd Salem MA

Residential Address

978-744-7315

Tel. No. (optional)

Committee to elect Steve Dibble

Committee Name

Paula C. Boardway

Name of Committee Treasurer

74 Moffatt Rd Salem MA 01970

Committee Mailing Address

978-744-7315

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 731.12

Line 2: Total receipts this period (page 2, line 11) \$ 1320.00

Line 3: Subtotal (line 1 plus line 2) \$ 2051.12

Line 4: Total expenditures this period (page 3, line 14) \$ 1607.79

Line 5: Ending balance (line 3 minus line 4) \$ 443.33

Line 6: Total in-kind contributions this period (page 4) \$ 0

Line 7: Total (all) outstanding liabilities (page 4) \$ 643.36

Line 8: Name of bank(s) used Eastern Bank

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:

Paula C. Boardway
Treasurer's signature (in ink)

10/16/19
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the 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.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
1/6/16	Robert Bailey, 7 Pershing Rd Salem	50 00	Nursing Home Director
1/3/16	George Barbuzzi, 17 Preston Rd Salem	250 00	
1/6/16	ELLEN BOUCHARD, 23 Linden Ave Salem	50 00	
1/5/16	Gwyneth Buell, 8 Surrey Rd Salem	25 00	
1/7/16	Kevin Daly, 33 Intervale Rd Salem	50 00	
1/15/16	Delinda Dellorano 62 Moffatt Rd, Salem	50 00	
1/6/16	Domingo Dominguez 18 Raymond Rd Salem	50 00	
1/6/16	Roland Gauthier 18 Lincoln Rd Salem	20 00	
1/6/16	SARAH HARRINGTON 26 Surrey Rd Salem	50 00	
1/5/16	Georgette & JOE Ingeri 85 Moffatt Salem	50 00	
1/15/16	Ed & Vera Kenney 16 Marion Rd Salem	25 00	
1/6/16	Peter Maitland 23 Cedarwood Ave Salem	50 00	
1/5/16	Virginia Michard 70 Moffatt Rd Salem	20 00	
1/6/16	Sandra Power 18 Loring Ave Salem	25 00	
1/6/16	Francis Riggieri 450 Lafayette Salem	25 00	
1/7/16	Jerry Ryan 4 Nichols St Salem	25 00	
1/6/16	Kathleen Sargent 8 Maple Ave Salem	25 00	
1/7/16	Mary Ann Silva 17 Sumner Rd Salem	25 00	
1/6/16	Elena Sokol 8 Auburn Rd Salem	50 00	
1/6/16	Mark Steele 214 Loring Ave Salem	50 00	
1/6/16	JOY TACHUK 1 MOFFATT RD Salem	50 00	
1/7/16	Mary Tremblay 23 Raymond Ave Salem	25 00	
1/6/16	Peter Tsartouras 12 Marion Rd Salem	50 00	
1/6/16	James Willis, P.O. Box 8463 Salem	25 00	
Line 9: Total receipts in excess of \$50 (or listed above)		1115 00	✓
Line 10: Total receipts \$50 and under* (not listed above)		208	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1320 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.

\$1,320.00

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 number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
1/6/16	Victoria Station	Wharf St, Salem, MA	Fund raiser	492	79
1/21/16	Stephen Dibble	74 Moffatt Rd Salem	Partial loan repayment	1,000	00
4/16/16	Saltensbill PTO	Lafayette St, Salem	Donation	25	00
5/26/16	Kathleen Wynn	Fort Ave Salem	City Planner Lynn Duncan Retirement	25	00
8/18/16	Have n from Hunger	17 Wallis St Peabody MA	Peabody/Salem Softball Game - Donation	25	00
6/1/16	Salem SEPAC	29 Higginson Ave Salem	Donation	40	00
Line 12: Expenditures over \$50				1,492	79
Line 13: Expenditures \$50 and under*				115	00
Line 14: TOTAL EXPENDITURES				1,607	79

Enter on page 1, line 4

*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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6				Line 15: In-kind over \$50
				Line 16: In-kind \$50 and under
				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
10/25-11/30/15	Stephen Dibble	74 Moffatt Rd Salem, MA	Various - all listed on expenditures	593.36
10/2/15	Stephen Dibble	74 Moffatt Rd Salem, MA	Open bank account	50.00
Enter on page 1, line 7				Line 18: OUTSTANDING LIABILITIES (ALL)
				643.36