

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	2019 Ending Date: 2 3 2019
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Candidate Full Name (if applicable) Office Sought and District Residential Address E-mail: Phone # (optional):	Name of Committee Treasurer 27 Lemon Committee Mailing Address E-mail: Meger & Gran, Com Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	259.11
Line 2: Total receipts this period (page 3, line 11	
Line 3: Subtotal (line 1 plus line 2)	259.11
Line 4: Total expenditures this period (page 5, lin	ne 14) 259, //
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period (p	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	FHE
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-king finance activity of all persons acting under the authority or on behalf of this committee. Signed under the penalties of perjury:	in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 12/29/19
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1	box only)
activity, of all persons acting under the authority of on behalf during this reporting incurred any liabilities nor made any expenditures on my behalf during this reporting the control of the control o	he best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ng period.
Candidate without Committee OR Candidate with independent activity filing I certify that I have examined this report including attached schedules and it is, to te finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of	separate report the best of my knowledge and belief, a true and complete statement of all campaign the best of my knowledge and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature)

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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: Total Receipts of	over \$50 (or listed above)		
): Total Receipts	\$50 and under* (not listed above)		
L TOTAL DECI	EIPTS IN THE PERIOD		Enter on page 1, line 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.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

eport 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
9/14/19	Pangallo for Salem	Salem, MA	Campaign contribute	50
7/25/19	Committee to elect Jen Holmgren	Gloucester, MA	Campaign contribution	50
10/1/19	Committee to Elect Alice Merkl	Salem, MA	compaign contribution	50
10/6/19	Committee to Elect Leffrey M. Cohen	Salem, MA	contribution	56
10/10/19	Murphy Committee	Quincy, MA	carpaign	59,11
		-		
]	Line 12: Total Expenditures ove	r \$50 (or listed above)	259.11
		Line 13: Total Expenditures \$50	and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITU	RES IN THE PERIOD	259.11

^{*} 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 4

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	
			i p	
			, =	
9: Total Receipts ov	er \$50 (or listed above)			
10: Total Receipts \$3	50 and under* (not listed above)			
	IPTS IN THE PERIOD	← E	nter on page 1, line 2 de only those receipts not itemized above.	

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