

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: Octob	er 17 2015 Ending Date: December 3 2015		
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	CHTY CLERK, SALEM, MASS. ☐ 30 day after election ☐ year-end report ☐ dissolution		
Robert K McCarthy	Committee to Elect Robert K McCarthy		
Candidate Full Name (if applicable)	Committee Name		
Councillor Ward 1	Aidan P Bunting		
Office Sought and District	Name of Committee Treasurer		
148 Bay View Ave	96 Bay View Ave		
Residential Address	Committee Mailing Address		
Telephone Number (optional):	Telephone Number (optional):		
SUMMARY BALANC	E INFORMATION:		
Line 1: Ending Balance from previous report	298.97		
Line 2: Total receipts this period (page 3, line 11)	250		
Line 3: Subtotal (line 1 plus line 2)	548.97		
Line 4: Total expenditures this period (page 5, line	e 14)		
Line 5: Ending Balance (line 3 minus line 4)	548.97		
Line 6: Total in-kind contributions this period (page	ge 6) -0-		
Line 7: Total (all) outstanding liabilities (page 7)	- 0 -		
Line 8: Name of bank(s) used: Eastern			
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind c finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	ontributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: January 16 2016		
activity, of all persons acting under the authority or on behalf of this committee in acc incurred any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee OR Candidate with independent activity filing sep I certify that I have examined this report including attached schedules and it is, to the	parate report best of my knowledge and belief, a true and complete statement of all campaign		
finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this Signed under the penalties of perjury:	in-kind contributions and liabilities for this reporting period and represents the committee in accordance with the requirements of M.G.L. c. 55. (Candidate's signature) Date: 1/6/1/6		

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)
October 26 2015	Carter L Vinson 32 Beach Ave Salem MA 01970	250	Principal, Ernst & Young
ine 9: Total Recei	pts over \$50 (or listed above)	250	
ne 10: Total Rece	ipts \$50 and under* (not listed above)		
Line 11: TOTAL RECEIPTS IN THE PERIOD		250	← Enter on page 1, line 2

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	ä		
Line 9: Total Receip	ots over \$50 (or listed above)		
Line 10: Total Receip	pts \$50 and under* (not listed above)		
Line 11: TOTAL R	ECEIPTS IN THE PERIOD	-0-	← 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 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 report all expenditures. Please include your committee name and a page number on each page.)

-port an expend	To Whom Paid	nittee name and a page number or	F6/	T
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Paid	(aiphabetical listing)	Address	rurpose of Expenditure	Amount
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Line 12: Total Expend			er \$50 (or listed above)	
Line 13: Total Expenditures \$50 and under* (not listed above)			1	
	Enter on page 1. line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	-0-
		include them in line 12. Line 13 cl		

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

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SCHEDULE B: EXPENDITURES (continued)

To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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Line 12: Expenditures over \$50 (or listed above)				
Line 13: Expenditures \$50 and under* (not listed above)			and the same of th	
		Time 14. TOTAL EXPENDENT	LIDEC IN THE DEDICE	Na. A.
	10 12 12 12 12 12 12 12 12 12 12 12 12 12	Line 14: TOTAL EXPENDIT		a Cel man

^{*} 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
		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 $6 \rightarrow$	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	-0-

^{*} 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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