



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2018 JAN 25 PM 6:04

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

CITY CLERK
SALEM, MASS.

Fill in dates:

Reporting Period Beginning

Month

Date

Year

Ending

Month

Date

Year

Type of report: (Check one)

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

Domingo Dominguez
Full Name of Candidate (if applicable)
Councillor At-Large
Office Sought and District
18 Raymond Rd
Residential Address
978815-1089 Tel. No. (optional)

Domingo Dominguez
Committee Name
Councillor At-Large
Name of Committee Treasurer
Anderson Pena
Committee Mailing Address
18 Raymond Rd
978815-1089 Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 50.00
Line 2: Total receipts this period (page 2, line 11) \$ 2100.00
Line 3: Subtotal (line 1 plus line 2) \$ 2150.00
Line 4: Total expenditures this period (page 3, line 14) \$ 2100
Line 5: Ending balance (line 3 minus line 4) \$ 50

Line 6: Total in-kind contributions this period (page 4) \$ _____
Line 7: Total (all) outstanding liabilities (page 4) \$ _____
Line 8: Name of bank(s) used _____

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.

Treasurer's signature (in ink)

Signed under the penalties of perjury:

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)
10/23/17	Elie Katz	100	00	
10/21/17	John Tierney	100	00	
10/21/17	Leoncio Vizcaino	300	00	Salem Business Center 93 Congress St. Salem, MA
10/17/17	Jacob S. Segal	50	00	
10/20/17	Javier Racan	200		Business owner
11/6/17	Deborah H. Prefitree	50	00	
10/4/17	Edward H. Moriatti	100	00	
11/4/17	Danilo Dilone	200	00	Business owner
11/5/17	Belkis Aguirre	100		
11/5/17	Nestor Grullon	100		
11/05/17	Yolani Inoa 98 Congress St.	500		Business owner
11/6/17	Anderson Pena	100	00	
11/7/17	Luz Villalobos	100	00	
11/7/17	Ruben Cedeno	100	00	
Line 9: Total receipts in excess of \$50 (or listed above)		2000		
Line 10: Total receipts \$50 and under* (not listed above)		100		
Line 11: TOTAL RECEIPTS IN THE PERIOD		2100		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.

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	
10/23/17	Stamps Post office	2 Margin St Salem, MA	Hauling	245	00
10/25/17	Post office Stamps	2 Margin St Salem, MA	Hauling	441	00
10/30/17	Post office Stamps	2 Margin St Salem, MA	Hauling	196	00
11/1/17	Post office Stamps		Hauling	245	00
11/2/17	Post office Stamps		Hauling	147	00
11/4/17	Post office Stamps		Hauling	49	00
11/3/17	Post office Stamps		Hauling	441	00
10/28/17	Post office Stamps	Salem, MA	Hauling	98	00
10/29/17	Staples	Salem, MA	Envelop	29.	99
11/3/17	Los V. Tires Return		Cont. Return to Danilo	200	00
				9	01
Line 12: Expenditures over \$50				2012	00
Line 13: Expenditures \$50 and under*				88	00
Line 14: TOTAL EXPENDITURES				2,100	00

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
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	