

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: Sep	5211 2 Ending D&e: 43 Oct 18, 2013
Type of Report: (Check one)	TY CLERK, SALEM, MASS.
	30 day after election year-end report dissolution
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Beth Tracey Gerard	Committee to Elect Beth Genard
Candidate Full Name (if applicable)	Committee Name
Ward 6 Councillor	Andrew Gerard
Office Sought and District	Name of Committee Treasurer
49 Larchmont Rd Salem	49 Larchmont Rd, Salem
Residential Address	Committee Mailing Address
Talankana Number (antional)	Telephone Number (optional):
Telephone Number (optional):	retephone (valuoei (opuona).
SUMMARY BALANCE	INFORMATION:
Line L. Ending Delenge from provious concert	16450
Line 1: Ending Balance from previous report	164.50
Line 2: Total receipts this period (page 3, line 11)	1069.06
Line 3: Subtotal (line 1 plus line 2)	1233.56
Line 4: Total expenditures this period (page 5, line 1	4) 979.39
Line 5: Ending Balance (line 3 minus line 4)	254.17
Line 6: Total in-kind contributions this period (page	6) Ø
Line 7: Total (all) outstanding liabilities (page 7)	300.00
Line 8: Name of bank(s) used: 53/6	em Five
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of a activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributes activity of all persons acting under the authority or on behalf of this committee in according to the penalties of perjury:	ributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box on	aly)
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 bes activity, of all persons acting under the authority or on behalf of this committee in according incurred any liabilities nor made any expenditures on my behalf during this reporting per	dance with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee OR Candidate with independent activity filing separal I certify that I have examined this report including attached schedules and it is, to the best finance activity, including contributions, loans, receipts, expenditures, disbursements, incampaign finance activity of all persons activity and the authority of on hehalf of this considered under the penalties of perjury:	it of my knowledge and belief, a true and complete statement of all campaign kind contributions and liabilities for this reporting period and represents the

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)
10/8	Robert Badolato 14 Buchanan Rd, Marblehead	150,00	
9/10	Andrew Ferord 49 Lorchmat Rd, Solem	549.06	Software Engineer Eliza Corporation
9/13	Diane and Richard Pablich 35 Winter Island Rd, Salem	150.00	
10/1)	Amber Wordwoll and time Glad I Clarement Rd, Salem	100,00	
		and the state of t	
Line 9: Total Recei	ipts over \$50 (or listed above)	949.06	
Line 10: Total Rece	ripts \$50 and under* (not listed above)	120.00	
Line 11: TOTAL F	RECEIPTS IN THE PERIOD	1069.06	← 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.)

report air expent		littee name and a page number on	T caca page)	T
Date Paid	To Whom Paid	Address	Purpose of Expenditure	Amount
Date Paid	(alphabetical listing)		I ut pose of Expenditure	Amount
10/21	Pamplemousse, Frc	185 Essex st Solom, MA	Cotering	90.94
9/24	Scorlet Letter Press	salem MA	Printing	297.50
7/10	Thrister Speedi Print	26 Howley st Pedbody MA	Printing	549.06
				200
		-		
Line 12: Total Expenditures over \$50 (or listed above)		937.50		
Line 13: Total Expenditures \$50 and under* (not listed above)			41.89	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD 979.3				979.39

^{*} 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 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
			Parameter and the second secon	
The state of the s				
of the state of th				
				17.7
		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	Ø

^{*} 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.

Page 6

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
8/2	Andrew Gerard	Salem MA	Cosh Depost	300
		4		
1	Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)			