Form CPF M 102: Campaign Finance Report
Municipal Form

Office of Campaign and Political Finance

Commonwealth of Massachusetts

2019 FEB -6 AM 9:03

CITY CLERK
SALEM, MASS.

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2018 Ending Date: 12/31/2018

Type of Report: (Check one)

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

Lisa Jean Baptiste Peterson	Lisa Peterson for Salem
Candidate Full Name (if applicable)	Committee Name
City Councillor, Ward 3 - Salem, Massachusetts	Scott Peterson
Office Sought and District	Name of Committee Treasurer
68 Broad Street, Salem, MA 01970	68 Broad Street, Salem, MA 01970
Residential Address	Committee Mailing Address
E-mail: lisa@lisaforsalem.com	E-mail: scott.lee.peterson@gmail.com
Phone # (optional): 978-219-9840	Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	$39.47
Line 2: Total receipts this period (page 3, line 11)	$100.00
Line 3: Subtotal (line 1 plus line 2)	$139.47
Line 4: Total expenditures this period (page 5, line 14)	$6.07
Line 5: Ending Balance (line 3 minus line 4)	$133.40
Line 6: Total in-kind contributions this period (page 6)	$0.00
Line 7: Total (all) outstanding liabilities (page 7)	$0.00
Line 8: Name of bank(s) used:	Salem Five

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: Scott P (Treasurer's signature) Date: 1/22/2019

FOR CANDIDATE FILINGS ONLY: **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: Lisa J B Peterson (Candidate's signature) Date: 1/22/2019

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)
1/22/2018	Lisa Peterson 68 Broad Street Salem, MA 01970	$100.00	

Line 9: Total Receipts over $50 (or listed above)	$100.00
Line 10: Total Receipts $50 and under* (not listed above)	$0.00
Line 11: TOTAL RECEIPTS IN THE PERIOD	$100.00 ← 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.