



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2013 JAN 17 A 9:53

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

FILE #

CITY CLERK, SALEM, MASS.

Fill in dates:

Reporting Period Beginning 1 1 2012 Ending 12 31 2012

Type of report: (Check one)

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

MICHAEL SOSNOWSKI

Full Name of Candidate (if applicable)

COUNCILLOR - WARD II

Office Sought and District

17 Collins St.

Residential Address

Salem, Ma.

Tel. No. (optional)

COMMITTEE TO ELEC  
MICHAEL SOSNOWSKI

Committee Name

PATRICIA SOSNOWSKI

Name of Committee Treasurer

17 Collins St.

Committee Mailing Address

Salem, Ma.

Tel. No. (optional)

## SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 4753.87

Line 2: Total receipts this period (page 2, line 11) \$ 0

Line 3: Subtotal (line 1 plus line 2) \$ 4753.87

Line 4: Total expenditures this period (page 3, line 14) \$ 1584.69

Line 5: Ending balance (line 3 minus line 4) \$ 3169.18

Line 6: Total in-kind contributions this period (page 4) \$ 0

Line 7: Total (all) outstanding liabilities (page 4) \$ 0

Line 8: Name of bank(s) used SOVEREIGN BANK

### 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:

Patricia Sosnowski  
Treasurer's signature (in ink)

1-15-13  
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:

Michael Sosnowski  
Candidate signature (in ink)

1-16-12  
Date

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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.

\* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

**Page 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.

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	
12/1/12	HISTORIC Salem	9 NORTH ST. Salem, Ma.	DONATION	100	-
1/23/12	Patricia Sosnausk	17 COLLINS ST Salem	REIMBURSEMENT CHRISTMAS MAIL	164	93
2/18/12	PATRICIA Sosnausk	17 COLLINS ST. Salem	REIMBURSEMENT 4 YEARS, TEL, INT.	616	11
9/22/12	Project K-Nine	54th FIVE 424 ESSEX ST. Salem	DONATION	100	-
1/18/12	STAPLES	Winnan SQ. Salem, Ma.	Office Supplies	137	04
3/10/12	Staples	Winnan SQ. Salem, Ma.	Office Supplies	176	13
10/4/12	Staples	Winnan SQ. Salem, Ma.	Office Supplies	100	48
Line 12: Expenditures over \$50				1394	69
Line 13: Expenditures \$50 and under*				190	-
Line 14: TOTAL EXPENDITURES				1584	69

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	
			<b>Line 17: Total In-kind</b>	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.

## 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			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	0