

## Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

7019 JAN 16 PM 1: 25

	File with: City or Town Cler	k or Election Commission
Fill in Reporting Period dates: Beginning Date: 1-1-18	Ending Date 12-315.	18
Type of Report: (Check one)		
8th day preceding preliminary 8th day preceding election 30 day a	after election year-end report	dissolution
Candidate Full Name (if applicable)  Office Solight and District  Act A Vehicle Solom (197)  Residential Address  E-mail:  Phone # (optional):  Phone # (optional):  Phone # (optional)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Salan mo m cust. ril
SUMMARY BALANCE INFOR	MATION:	
Line 1: Ending Balance from previous report  Line 2: Total receipts this period (page 3, line 11)  Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this period (page 5, line 14)  Line 5: Ending Balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period (page 6)  Line 7: Total (all) outstanding liabilities (page 7)	100	
Line 8: Name of bank(s) used:  fidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best of my knowledge ctivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and nance activity of all persons acting under the authority or on behalf of this committee in accordance with signed under the penalties of perjury:	d liabilities for this reporting period and represen	Il campaign finance ats the campaign
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 know activity, of all persons acting under the authority or on behalf of this committee in accordance with the 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 know finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions armaign finance activity of all persons acting under the authority or on behalf of this committee in accordance.	wledge and belief, a true and complete statement he requirements of M.G.L. c. 55. I have not received wledge and belief, a true and complete statement butions and liabilities for this reporting period and	of all campaign

## **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)
			(101 CONTINUES OF CASO OF MOTE)
Line 9: Total Receip	ots over \$50 (or listed above)	0	
Line 10: Total Recei	pts \$50 and under* (not listed above)	0	
Line 11: TOTAL R	ECEIPTS IN THE PERIOD	0	← Enter on page 1, line 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.

(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.)							
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount			
9-24-18	michelle 07,105	2 Locust Steet Salen, WA 01970		100			
		Line 12: Total Expenditures over \$50 (or listed above)					
		Line 13: Total Expenditures \$50 and under* (not listed above)					
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD							