Ilene Simons

From:

Stephen Lovely <stephen.lovely@verizon.net>

Sent:

Tuesday, January 22, 2019 7:26 PM

To:

Ilene Simons

Attachments:

Signed 2019 CAMPAIGN YEAR END.pdf

llene

Enclosed is a copy of my year-end campaign finance report.

City Hall was closed when I went to bring this by.

I will put in the mailbox out front.

Hope all is well with you.

Thanks

Stephen

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Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 1/1/	/2018 Ending Date: Dec 31, 2018
Type of Report: (Check one) Bth day preceding preliminary 8th day preceding election	30 day after election
Stephen P Lovely	Committee to Elect Stephen P lovely
Candidate Full Name (if applicable)	Committee Name
City Council Ward 3 Office Sought and District	Jenna Lovely Name of Committee Treasurer
14 Story Street Salem Mass. 01970	14 Story Street Salem Mass. 01970
Residential Address	Committee Mailing Address
E-mail:	E-mail,
Phone # (optional):	Phone # (optional):
SUMMARY BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	651.34
Line 2: Total receipts this period (page 3, line 11	0
Line 3: Subtotal (line 1 plus line 2)	651.34
Line 4: Total expenditures this period (page 5, line	ne 14) 200
Line 5: Ending Balance (line 3 minus line 4)	451.34
Line 6: Total in-kind contributions this period (p	
Line 7: Total (all) outstanding liabilities (page 7)	0
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 besactivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be activity, of all persons acting under the authority independent of the committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in a incurred any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee OR Candidate with independent activity filing a I certify that I have examined this report including attached schedules and it is, to the	contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c, 55. (Treasurer's signature) Date: Jan 22, 2019 Exercise the campaign of M.G.L. c. 55. Date: Jan 22, 2019 Dat
tinance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	ts, in-kind contributions and liabilities for this reporting period and represents the his committee in accordance with the requirements of M.G.L. c, 55.
Signed under the penalties of perjury:	(Candidate's signature) Date: Jan 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)
ne 9: Total Receip	ots over \$50 (or listed above)	0	
ne 10: Total Recei	pts \$50 and under* (not listed above)	0	
ne 11: TOTAL R	ECEIPTS IN THE PERIOD	0	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
ne 9: Total Receipt	s over \$50 (or listed above)		
	ts \$50 and under* (not listed above)		
	CEIPTS IN THE PERIOD		← 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Feb 16, 2018	Pete Frates #3 Fund	21 Landers Drive Beverly, MA 01915	Donation	20
ř.				
=				
		Line 12: Total Expenditures o	ver \$50 (or listed above)	200
Line 13: Total Expenditures \$50 and under* (not listed above)			(
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	200

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
				9
		Line 12: Expenditures over \$50	(or listed above)	0
Line 13: Expenditures \$50 and under* (not listed above)			0	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	

^{*} 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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: In-Kind Contributions	over \$50 (or listed above)	0
	Line 16: In-Kind Contributions \$50 & under (not listed above)			0
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			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.

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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: TOTAL OUTSTANI	DING LIABILITIES (ALL)	0