

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

le with: ty or Town Clerk or Election Commission Please print or type all inf	formation, except signatures.
Fill in dates: Morth Date Yes Reporting Period Beginning	Ending Month Date Year 2003
Type of report: (Check one) Sth day preceding preliminary Sth day preceding elections	ion □30 day after election □year-end report □dissolution
Full Name of Candidate (If applicable) ROARD OF HEGHY	Committee Name
Office Sought and District	Name of Committee Treasurer
Residential Address 48 NAME OUGHT Rd. 52662	Committee Mailing Address
508-255-8178 Tel. No. (optional)	Tel. No. (optional)
Line 1: Ending balance from pre Line 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period Line 5: Ending balance (line 3 minus Line 6: Total in-kind contributions Line 7: Total (all) outstanding liabil Line 8: Name of bank(s) used Affidavit of Committee Treasurer:	(page 2, line 11) S eriod (page 3, line 14) S s line 4) S lities (page 4) S lities (page 4) S lities (page 4) S s, to the best of my knowledge and belief, a true and complete statement of all campaign arrements, in-kind contributions and liabilities for this reporting period and represents the of this committee in accordance with the requirements of M.G.L. c. 55. enalties of perjury:
Treasurer's signature (in ink)	Date
FOR CANDIDATE FILINGS	ONLY: (CANDIDATE MUST SIGN BELOW)
finance activity, of all persons acting under the authority or on behalf of this contributions, incurred any liabilities nor made any expenditures on my behalf of this Candidate without Committee OR Candidate with Independent activities and it is a liabilities attached schedules and it is	s, to the best of my knowledge and belief, a true and complete statement of all campaign committee in accordance with the requirements of M.G.L. c. 55. I have not received any foliaring this reporting period. ty filling separate report s, to the best of my knowledge and belief, a true and complete statement of all campaign sements, in-kind contributions and liabilities for this reporting period and represents the If of this committee in accordance with the requirements of M.G.L. c. 55.

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 themize 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.

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.

Date Name and Residential Address Received (alphabetical listing required)		Amount		Occupation & Employer (for contributions of \$200 or more)		
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				·		
				·		
			-			
Line O	Total receipts in excess of \$50 (or listed above)		-			
Line 9.	Total receipts \$50 and under* (not listed above)					
Line 10:	TOTAL RECEIPTS IN THE PERIOD			Enter on page 1, line 2 O should include only those receipts not item		

[•] 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.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

number on eac		Address	Purpose of Expenditure	Amount	
Date Paid	To Whom Paid	Address	ruipose of Expenditure	Amot	168C
	(alphabetical listing)		NO Can	Т	
4-30-13	GATE HOUSE Media	Man St	Ha 501 5/12/12	820	5
- / /	"CAPE CODDER"	ORLEAN MO	cartier >1,1/12		
5/9/13	GATE HOUSE Media "CAPE COODER" CURLEY Disect Mail	Man ST ORLEADS 15 FRUEAN AVE So YARMOWTH MA 02669	Ad for 5/17/13 Edition 5/17/13 Mailing to Regioners	1,616	80
-		-	J		
····					
					-
				The state of the s	
					-
L		Line 12	: Expenditures over \$50	2436	8.5
			: Expenditures \$50 and under		1
	Enter on many 1 line 4				33
	Enter on page 1, line 4		4:TOTAL EXPENDITURES		32

^{*}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 3

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
			,	
	·			
	i i	Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	

^{*} 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	Line 18: OUTSTANDING LIABILITIES (ALL)		