

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

Commonwealth of Massachusetts	Fill with Etry or Town Clerk or Election Commission				
Fill in Reporting Period dates: Beginning Date:	3215 Ending Date: 12 28 15				
Type of Report: (Check one)					
☐ 8th day preceding preliminary ☐ 8th day preceding election ☐	☐ 30 day after election ☐ year-end report ☑ dissolution				
Candidate Full Name (if applicable)	Committee to the A lyndi Langle				
Councilor Bt large Office Sought and District	Maria Hume Name of Committee Treasurer				
349 H. M. St. New Duryport, mg	347 High St Deubumport MA Committee Mailing Address				
Telephone Number (optional):	Telephone Number (optional): 978-204-5682				
SUMMARY BALANCE INFORMATION:					
Line 1: Ending Balance from previous report	-2938-35				
Line 2: Total receipts this period (page 3, line 11)	\bigcirc				
Line 3: Subtotal (line 1 plus line 2)	-2938:35				
Line 4: Total expenditures this period (page 5, line	14) \$ 913.94				
Line 5: Ending Balance (line 3 minus line 4)	-3852-29				
Line 6: Total in-kind contributions this period (page	ge 6) 558606				
Line 7: Total (all) outstanding liabilities (page 7)	0				
Line 8: Name of bank(s) used: Newburges 4 5cents Swings Pants					
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:	ontributions and liabilities for this reporting period and represents the campaign				
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	conly)				
activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting					
Candidate without Committee OR Candidate with independent activity filing set I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	best of my knowledge and belief, a true and complete statement of all campaign in-kind contributions and liabilities for this reporting period and represents the				
Signed under the penalties of perjury:	Mea (Candidate's signature) Date: 12/28/15				

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 contributions of \$200 or more)
111			
9: Total Receipts	over \$50 (or listed above)		
10: Total Receipts	\$50 and under* (not listed above)		
11: TOTAL REC	EIPTS 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 (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
19/88/15	Lyndi	347 Hight St Newburups of		913-94	
Line 12: Expenditures over \$50 (or listed above)					
	Line 13: Expenditures \$50 and under* (not listed above)				
	Enter on page 1, line 4 Line 14: TOTAL EXPENDITURES IN THE PERIOD Line 13: should include only those expenditures not itemized				

^{*} 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 Contributio	n Value
10/915	Lyndi Larphean	347 Aigh St	Lean	5586-00
		ine 15: In-Kind Contributions o		5586·06
	L	ine 16: In-Kind Contributions \$5	50 & under (not listed above)	
f an in-kind contrib	Enter on page 1, line 6 → Loution is received from a person who	ine 17: TOTAL IN-KIND CON	NTRIBUTIONS	5586°06

^{*} 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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