

M,G.L. c. 55.

Candidate signature (in ink)

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVE Y OLERK'S OH WEURYPORT.		0	- ·
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Date

mmonwealth Massachusetts					EVEURY	PORTALL	
le with: ity or Town Clerk or Election	n Commission	Please print or ty	pe all informatio	n, except signatures	112 JAH 20) A II: 35	
Fill in dates: Reporting Period Beg	ginning Mon	h Date Vender 1	Year 2011	Ending Deco	part 3	Yoar 201	<u> </u>
Type of report: (Ch		□8th day precedin	ig election □3	0 day after election	☑year-en	d report □dis	ssolution
Coun	of Candidate (C. OI af ce Sought and)	Large	Ci	Name of Con	mittee Name	6 VACCO	Sulliven, 3
	Residential Add		onal)	Committee	Mailing Add	ress Tel. No. (option	nal)
Line Line Line Line Line	2: Total 1 3: Subtot 4: Total 6 5: Ending 6: Total in 7: Total (a	SUMMARY g balance fro receipts this p al (line 1 plus line expenditures g balance (line n-kind contrib all) outstandin of bank(s) use	period (page 2) this period 3 minus line 4) outions this	(page 3, line 14) oeriod (page 4) (page 4)	\$ 697 \$ 500 \$ 119	7.61 7.61 7.61	
Affidavit of Committee I certify that I have exan campaign finance activity and represents the campa M.G.L. 1. 35.	nined this report y, including all co aign finance activ	ntributions, loans, rece ity of all persons actin	ints expenditures d	isbursements, in-kind c y or on behalf of this	committee in ac	i hadmines for mis i	chotting berion
	FOR C	ANDIDATE FIL	INGS ONLY: (ANDIDATE MUST S	IGN BELOW)		
Affidavit of Candidate Candidate with Condidate I certify that I have exacampaign finance active have not received any condidate without of Candidate with Candidate without of Candidate with Can	nmittee and no a mined this report ity, of all person ontributions, incur Committee OR Committee this report its including con	ctivity independent of including attached sch s acting under the auth tred any liabilities nor r andidate with indeper including attached sch tributions loans received	edules and it is, to to ority or on behalf or made any expenditured activity filing tedules and it is, to to see expenditures, di	this committee in access on my behalf during to separate report the best of my knowled shursements, in-kind co	ordance with the chis reporting pe ge and belief, a contributions and	true and complete s	statement of all

Signed under the penalties of perjury:

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.

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 Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
11/4	Professional Fire fighters of Mass. Bowdoin St. Boston	500	00	
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			-	
_				, .
		,		
	·			
	Total receipts in excess of \$50 (or listed above)	500	00	
	Total receipts \$50 and under* (not listed above)	0		
Line 11: '	TOTAL RECEIPTS IN THE PERIOD	500	00	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.

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	Amo	unt
11/2	Murket Busket	Storey Ave.	Staff meeting.	75	00
11/2	Port Wine + Spirits		Staff meeting	130	93
11/7	WNBP	One Merrimacks.	Advertising	80	00
11/8	Market Basket	Storey Ave.	Election Day Reception	131	99
11/8	Port Wine + Spirits	Storey Ave.	Election Day reception	89	00
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	· · · · · · · · · · · · · · · · · · ·	Line 12:	Expenditures over \$50	50 L	92
	. "	Line 13:	Expenditures \$50 and under*	690	69
H	Enter on page 1, line 4	Line 14:	TOTAL EXPENDITURES	1197	6/

^{*}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 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
		•		
			,	
		T : 15.	To Island over \$50	
			In-kind over \$50 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
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				-
E	Inter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	

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

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