

Form CPF M 102: Campaign Finance Report Municipal Form CITY CLERK'S OFFICE Office of Campaign and Political Finance NEWBURYPORT, MA

2023 SEP 12 A 9: 414
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 9/1/23 Ending Date: 9/11/23					
Type of Report: (Check one) Sth day preceding preliminary □ 8th day preceding election □ 30 day after election □ year-end report □ dissolution					
ANDREW CRAWFORD BOGER Candidate Full Name (if applicable) SCHOOL COMMITTEE Office Sought and District G5 MIDDLE ST., NEWBURYPORT, MA 01950 Residential Address E-mail: ANDY BOGER AGMAIL. COM Phone # (optional): 508 - 433 - 5672 BOGER 4 NBPT Committee Name OLIVIA BOGER Name of Committee Treasurer G5 MIDDLE ST., NEWBURYPORT, MA 01950 Committee Mailing Address E-mail: OCMA GLMAC. COM Phone # (optional): 617 - 710 - 2172					
SUMMARY BALANCE INFORMATION:					
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) Line 8: Name of bank(s) used:					
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report. Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: Candidate's signature)					

SCHEDULE A: RECEIPTS

Occupation & Employer

year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the 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

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

Name and Residential Address report all receipts. Please include your committee name and a page number on each page.)

← Enter on page 1, line 2 Line 11: TOTAL RECEIPTS IN THE PERIOD Line 10: Total Receipts \$50 and under* (not listed above) Line 9: Total Receipts over \$50 (or listed above) (alphabetical listing required) (for contributions of \$200 or more) Amount Date Received

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
9/11/23	4 OVER		SIGNS	\$311.50	
9/5/23	4 OVIER		DOOR HAMBES	871.41	
9/5/23	4 OVER		SIGNS	\$204.53	
		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 * If you have itemized expenditures of \$50 and under, include them in line 12. 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.

Line 15: In-Kind Contributions \$50 & under (not listed above)	
Line 15: In-Kind Contributions over \$50 (or listed above)	
Seeived From Whom Received* Residential Address Description of Contribution Value	Date R

* 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.

Page 6

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4NJ			
·			
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
	RECEIPTS 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. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures. Please include your committee name and a page number on each page.)

) and under* (not listed above)	Line 13: Total Expenditures \$50		
	er \$50 (or listed above)	Line 12: Total Expenditures ov		
JunomA	Purpose of Expenditure	Address	bisA moNW oT (gnitsil Isottədadqla)	biaf e Paid

* 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 4

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 OUTSTANDING LIABILITIES (ALL)						

*			