

# Form CPF M 102: Campaign Finance Report **Municipal Form**

Municipal Form

Office of Campaign and Political Finance

NEWBURYPORT, MA

Fill in Reporting Period dates: Beginning Date:	Jun 20, 1	2013		nTown Clerk or 31, 2013	Election Commission	
			- Laurence			
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding elections.	ion 🔲	30 day afte	er election year-en	d report	dissolution	
Jared Eigerman		Jared Eiger	man Candidates Committe	ee		
Candidate Full Name (if applicable)	-		Committee N	ame		
Newburyport City Council, Ward 2	***************************************	Stephanie I	Viketic			
Office Sought and District			Name of Committee	e Treasurer		
83 High Street, Newburyport, MA 01950		83 High Str	eet, Newburyport, MA 019			
Residential Address			Committee Mailing	g Address		
Telephone Number (optional):		relephone Nui	mber (optional):			
SUMMARY BAL	ANCE	INFORM	IATION:			
Line 1: Ending Balance from previous repor	rt			0	*	
Line 2: Total receipts this period (page 3, lin	ne 11)	and the second s	Control of the Contro	2,423		
Line 3: Subtotal (line 1 plus line 2)						
Line 4: Total expenditures this period (page	5, line l	4)		2,030.85		
Line 5: Ending Balance (line 3 minus line 4)	)	· · · · · · · · · · · · · · · · · · ·		392.15	-	
Line 6: Total in-kind contributions this period	od (page	6)	ерен каналин жаны жаны жаны жаны жаны жаны жаны жан			
Line 7: Total (all) outstanding liabilities (pa				300		
Line 8: Name of bank(s) used: Newburyport	Five Cent	s Savings E	Sank			
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, expenditates, disbussements, in-leind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority of this committee in accordance with the requirements of M.G.L. c. 55.  Signed under the penalties of perjury:  (Treasurer's signature)  Date: Sep 5, 2013  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)						
Candidate with Committee and no activity independent of the 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.						
Candidate without Committee OR Candidate with independent activity  I certify that I have examined this report including attached schedules and it is finance activity, including contributions, loans, receipts, expenditures, disbut campaign finance activity of all persons acting under the authority or on behavior.	is, to the bes sements, in	st of my know -kind contribu	tions and liabilities for this repor	ting period and a		
Signed under the penaltics of perjury:			(Candidate's signature)	Date: Sep	5, 2013	

### 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)
Aug 3, 2013	Bilodeau, Mark 63 High Street Newburyport, MA 01950	500	Certified Financial Planner Commonwealth Financial Resources
Jun 26, 2013	Chatfield, Gillian 67 Federal Street Newburyport, MA 01950	400	Adult Education Instructor Self Employed
Jun 20, 2013	Eckholdt, Leslie 36 Warren Street Newburyport, MA 01950	100	The state of the s
Jun 20, 2013	Eigerman, Jared 63 High Street Newburyport, MA 01950	15	Attorney Dalton & Finegold PLC
Jun 27, 2013	Eigerman, Jared 63 High Street Newburyport, MA 01950	300	LOAN Attorney Dalton & Finegold PLC
Jun 30, 2013	Farwell-Clay, Julia 203 High Street Newburyport, MA 01950	500	Knitwear Designer Self Employed
Jun 24, 2013	Niketic, Stephanie 93 High Street Newburyport, MA 01950	250	Owner Sutra, Inc.
Aug 6, 2013	Niketic, Stephanie 93 High Street Newburyport, MA 01950	250	Owner Sutra, Inc.
Jul 5, 2013	Sales, Michael 6 Fruit Street Newburyport, MA 01950	108	
The state of the s			
Line 9: Total Rece	ipts over \$50 (or listed above)	2,423	
Line 10: Total Rec	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD	2,423	← Enter on page 1, line 2

<sup>\*</sup> 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.)

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Aug 1, 2013	Dawn Morris Photography	4 Forrester Street Newburyport, MA 01950	Photographs of candidate for advertising purposes.	531.35
Aug 7, 2013	Facebook, Inc.	Department 415 P.O. Box 10005 Palo Alto, CA 94303	Facebook advertising.	37.91
Aug 24, 2013	Karen Battles	15 Olive Street Newburyport, MA 01950	Graphic design for candidate advertising materials.	250
Jun 27, 2013	LeLievre Information Services	21 Wellesley Park Boston, MA 02124	Voter Data for candidate outreach.	300
Aug 15, 2013	Vogel Printing Co. Inc.	P.O. Box 127 Lawrence, MA 01842	Candidate Yard Sign printing.	492.2
Aug 21, 2013	Vogel Printing Co. Inc.	P.O. Box 127 Lawrence, MA 01842	Candidate brochure printing.	419.69
				Segretaria de la constanta de
			The second secon	
		Line 12: Total Expenditures of	over \$50 (or listed above)	2,030.85
		Line 13: Total Expenditures \$:	50 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	2,030.85

<sup>\*</sup> 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 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
Jun 27, 2013	Jared Eigerman	83 High Street Newburyport, MA 01950	Loan	300
The second secon				
	Enter on page 1, line 7	7 → Line 18: TOTAL OUTSTA	NDING LIABILITIES (ALL	300



## Form CPF R 1: Itemization of Reimbursements Office of Campaign and Political Finance

Office of Campaign and Political Finance One Ashbuton Place, Room 411 Boston, MA 02108 (617) 979-8300

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

80-44-0888844868669447-0884 <del>4-1888-941</del> 97777741	en e	Mildred Adjulies in Marketti jagan di adaglah da qaq	ling (Agent and Agent) by the line of the angle of the an	Date	e of Reimbursement: 8-2	- 13	
Name of Individual Being Reimbursed: JARED FIGERMAN							
Committee Name: JARED EIGERMAN CANDIDATES COMMITTEE							
CPF ID Number (if applicable): Telephone Number (optional):							
anna anna da dha dha dha dha dha dha dha dha dha	The second second second second Assessment	ITEMIZ	CE EXPENI	DITURES IN EXCES	SS OF \$50	i i i i i i i i i i i i i i i i i i i	
Date Paid	Vendor Nat	пе	Ve	ndor Address	Purpose of Expenditure	Amount	
8-1-13	Dawn Norris Photography				Candidate photos for advertising	531.35	
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	processor and the contract of		Endowners to the result of the control of the contr			Percentage of Control	
		.,,,,,					
	(Include items listed or	n Page 2) →	Line 1: Ex	penditures in excess o	f \$50 (itemized above):	531.35	
			Line 2: Ex	penditures \$50 or und	er (not itemized):		
Line 3: TOTAL AMOUNT REIMBURSED: 531.34						531.35	
Signed under the penalties of perjury:							
Signature of Candidate / Treasuren							

Please prepare a separate report for each reimbursement check issued by the committee.



# Form CPF R 1: Itemization of Reimbursements Office of Campaign and Political Finance

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Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

Date of Reimbursement: 8 - 31 - 13							
Name of Individual Being Reimbursed: JARED EIGERMAH							
Committee Name: JARED EIGERMAN CANDIDATES COMMITTEE							
CPF ID Number	Number (if applicable): Telephone Number (optional):						
		ITEMI	ZE EXPENDITURES IN EXCESS	3 OF \$50			
Date Paid	Vendor Name		Vendor Address	Purpose of Expenditure	Amount		
8-7-13	Facebook, Inc		PALO ALTO, CA	Advertising	37.61		
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			of manuscrosson and delivers of the second o				
(Include items listed on Page 2) → Line 1: Expenditures in excess of \$50 (itemized above);							
Line 2: Expenditures \$50 or under (not itemized):							
Line 3: TOTAL AMOUNT REIMBURSED: 37.60							
Signed under the penalties of perjury:							
Signature of Candidate / Treasurer Date: 9-5-13							
	Signature of Candidate / Treasurer						
Those weapers a support for each mark way and shock in and by the committee							

Please prepare a separate report for each reimbursement check issued by the committee.