

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

NECEIVED STYGLERK'S OFFICE NEWBURYPORT, MA

Fill in Reporting Period dates: Beginning Date:	File with: City or Town Clerk or Election Commission  -1-14 Ending Date: 12/31-14: [
True of Paranti (Charleson)	
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election	30 day after election  year-end report dissolution
LARRY GIUN TA  Candidate Full Name (if applicable)	CommiTTEE TO ELECT LAPRY GENTA  Committee Name
WARD 5 CITY COUNCILOR Office Sought and District	THERESA G TUNTA  Name of Committee Treasurer
Residential Address Telephone Number (optional):	25 STOREY AVENUE # 160 NEWBURYPORT  Committee Mailing Address  Telephone Number (optional):
SUMMARY BALAN	NCE INFORMATION:
Line 1: Ending Balance from previous report	811.02
Line 2: Total receipts this period (page 3, line 1	(1)
Line 3: Subtotal (line 1 plus line 2)	811.02
Line 4: Total expenditures this period (page 5, 1	line 14) Ø
Line 5: Ending Balance (line 3 minus line 4)	811.02
Line 6: Total in-kind contributions this period (	page 6) <b>4</b>
Line 7: Total (all) outstanding liabilities (page 7	7) Ø
Line 8: Name of bank(s) used: NEWBURY	PORT FIVE CENTS SAVINGS BANK
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the b activity, including all contributions, loans, receipts, expenditures, disbursements, in-kin finance activity of all persons acting under the authority or on behalf of this committee  Signed under the penalties of perjury:	in accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date:
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 a activity, of all persons acting under the authority or on behalf of this committee in incurred any liabilities nor made any expenditures on my behalf during this reporti	the best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ing period.
Candidate without Committee OR Candidate with independent activity filing I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of	the best of my knowledge and belief, a true and complete statement of all campaign ints, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date:

# 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	lease include your committee name and a pa Name and Residential Address (alphabetical listing required)	and Alexander	Occupation & Employer (for contributions of \$200 or more)
500 pp. 355.076 \$	The state of the s		
		AMERICANA AMERICANA	
Line 9: Total Reco	eipts over \$50 (or listed above)		The state of the s
Line 10: Total Rec	eipts \$50 and under* (not listed above)		k de
Line 11. TOTAT	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

### **SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required) Amou		Occupation & Employer (for contributions of \$200 or more)
	\$45° ; \$450° # 1		
ine 9: Total Receipt	s over \$50 (or listed above)		
ine 10: Total Receipt	ts \$50 and under* (not listed above)		
•	CEIPTS IN THE PERIOD	I was to be a superior of the	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

Date Paid	litures. Please include your comm To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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And survey and the state of the				
	4	Line 12: Total Expenditures ov	ver \$50 (or listed above)	A CONTRACTOR OF THE CONTRACTOR
		Line 13: Total Expenditures \$50 and under* (not listed above)		
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	TIRES 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 Page 4 above.

### **SCHEDULE B: EXPENDITURES (continued)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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A STATE OF THE STA	ani.			
	Line 12: Expenditures over \$50 (or listed above)			
		Line 13: Expenditures \$50 and ι	inder* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	ø

<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.

# 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.

				X7.1
Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
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	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Consider		
	Line 15: In-Kind Contributions over \$50 (or listed above)			
en er en	Line 16: In-Kind Contributions \$50 & under (not listed above)			
	Enter on page 1, line $6 \rightarrow$	ne 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

<sup>\*</sup> 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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### 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
	4 >			
	5.			AND TO THE RESERVE OF THE PARTY
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	DING LIABILITIES (ALL)	

