

## Form CPF M 102: Campaign Finance Report Municipal Form NEWBURYPORT, MA

Office of Campaign and Political Finance 20/1 OCT -7 PM 2: 57

Fill in Reporting Period dates: Beginning Date: JANU	JARY 1, 2021 Ending Date: OCTOBER 15, 2021
Type of Report: (Check one)  ☐ 8th day preceding preliminary  ☐ 8th day preceding election	30 day after election year-end report dissolution
RICHARD SALUS	
Candidate Full Name (if applicable)  Seuce Connitte &  Office Sought and District	Committee Name
45 Purchase Spreer	Name of Committee Treasurer
E-mail: richardsaluza comcost. net	Committee Mailing Address  E-mail:
Phone # (optional): 978, 463, 9098	Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 11)	\$216.25
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, lin	ne 14) # 216.85
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period (pa	age 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 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	contributions and liabilities for this reporting period and represents the compains
Signed under the penalties of perjury:	(Treasurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo  Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in actincurred any liabilities nor made any expenditures on my behalf during this reporting	be best of my knowledge and belief, a true and complete statement of all campaign finance configure with the requirements of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configure of M.G.L. c. 55. I have not recovered any second and the configuration and the conf
Candidate without Committee  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	be best of my knowledge and belief, a true and complete statement of all campaign s, in-kind contributions and liabilities for this reporting period and represents the is candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature) Date: 100721

## SCHEDULE A: RECEIPTS (continued)

(for contributions of \$200 or more)

<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 (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		Line 12: Expenditures over \$3	50 (or listed above)	
		Line 13: Expenditures \$50 and	l under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	

<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 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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			7	N
8.				
of the state of th				
	,			
				<u></u>
	(0)			

Port Signworks 6 New Pasture rd., Newburyport, MA, 01950 sales@portsignworks.com 978-465-6135 Main

http://www.portsignworks.com





Invoice 1733

**Elect Richard Salus** 

SALES REP INFO Renee W - Port Signworks Owner renee@portsignworks.com 978-465-6135

> QT# 2210

09/13/2021 INV.DUE DATE 09/13/2021 TERMS 50/50

ED BY CONTACT INFO

Richard Salus richardsalus@comcast.net +1 978-463-9094

ORDERED BY Richard Salus

#	ITEM		QTY	NON	U.PRICE	TOTAL (EXCL. TAX)
1	1/8" Coroplast DSO 24 x 18 Yard Sign Double-Sided Graphic print on 1/8" white coroplast. 24"w x 18" h			Each	\$18.00	\$180.00
	"Elect Richa	rd Salus for School Commitee"				
	In Blue and	White				
2	Graphic Design Hourly graphic design services		1	Hr	\$25.00	\$25.00
#	PAID ON	METHOD				AMOUNT
1 2	09/13/2021 09/09/2021	: -XXXX-8314, BAuth: 7700z : Richard Salus-XXXX-8314, BAuth: 08304z	PC-PROTECTION PP-CCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC			\$108.12 \$108.13

Please note the remaining balance is due if full, when picking up the completed item or when the installation has been completed.

 Subtotal:
 \$205.00

 Sales Tax (6.25%):
 \$11.25

 Total:
 \$216.25

 Total Paid:
 \$216.25

 Balance Due:
 \$0

SIGNATURE:

DATE: