

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance RECEIVED

CITY CLERK'S OFFICE

NEWBURYPORT, MA

7 - 176 de - 174 - 174 de - 174		File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:		Ending 1945: OCT 2 to 72 1/45
Type of Report: (Check one)		
8th day preceding preliminary 8th day preceding election	n [30 day after election year-end report dissolution
Peter & Mcelure		
Candidate Full Name (if applicable)		Committee Name
School Committee		
Office Sought and District	1	Name of Committee Treasurer
28 Federal St, NSpt, MA 019	2	
Residential Address		Committee Mailing Address
Telephone Number (optional):		Telephone Number (optional):
SUMMARY BALA	NC)	E 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)		0
Line 4: Total expenditures this period (page 5,	, line	(214)
Line 5: Ending Balance (line 3 minus line 4)		
Line 6: Total in-kind contributions this period	(pag	ge 6)
Line 7: Total (all) outstanding liabilities (page	7)	O
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 activity, including all contributions, loans, receipts, expenditures, disbursements, in-k	best o	of my knowledge and belief, a true and complete statement of all campaign finance outributions 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		ccordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:		(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 activity, of all persons acting under the authority or on behalf of this committee incurred any liabilities nor made any expenditures on my behalf during this repo	in acco	pest of my knowledge and belief, a true and complete statement of all campaign finance ordance with the requirements of M.G.L. c. 55. I have not received any contributions, period.
Candidate without Committee OR Candidate with independent activity filing certify that I have examined this report including attached schedules and it is, to finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of	o the b cents, i	best of my knowledge and belief, a true and complete statement of all campaign in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:		(Candidate's signature) Date: 10/24/15

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	
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(a) White is the second of the				
ine 9: Total Recei	pts over \$50 (or listed above)			
	ipts \$50 and under* (not listed above)		[
Line 11: TOTAL RECEIPTS IN THE PERIOD If you have itemized receipts of \$50 and under, include them in line 9. Line 10 shoul			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 (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date A and	(aiphabeticai listing)	1200		
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	•	Line 12: Expenditures over \$	50 (or listed above)	and the second s
		Line 13: Expenditures \$50 an	d under* (not listed above)	
		Line 14: TOTAL EXPENDI	TURES IN THE PERIOD should include only those expenditure	

^{*} 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		
				Parameter and a second as		
		CONTRACTOR				

	Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)					