



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
CITY CLERK'S OFFICE
NEWBURYPORT, MA

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

Ending Date: 2015 OCT 26 P 1:44

Type of Report: (Check one)

☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Bruce L Vogel

Candidate Full Name (if applicable)

COUNCILOR AT LARGE

Office Sought and District

90 Bromfield St, NBPT MA

Residential Address

Telephone Number (optional): 978-828-0711

Committee to Elect Bruce L Vogel

Committee Name

Kimberly M. Wilson

Name of Committee Treasurer

20 MADISON ST NBPT MA 01950

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

3243.

Line 2: Total receipts this period (page 3, line 11)

945

Line 3: Subtotal (line 1 plus line 2)

2298

Line 4: Total expenditures this period (page 5, line 14)

0

Line 5: Ending Balance (line 3 minus line 4)

2298

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

2298

Line 8: Name of bank(s) used: Newburyport Five

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: Kimberly M. Wilson (Treasurer's signature)

Date: 10/25/15

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 filing separate report

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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Bruce L Vogel (Candidate's signature)

Date: 10/25/15

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)
9/24/15	MR+MRS ALAN HUSAK 1601 W. Webster #1 Houston TX 77019	100	
10/9/15	LORRAINE MAHONEY 3 Bromfield CT NAPT MA 01950	100	
10/15/15	MARION LUVY 323 MERRIMAC ST NAPT MA 01950	500	RETIRED
Line 9: Total Receipts over \$50 (or listed above)		700	
Line 10: Total Receipts \$50 and under* (not listed above)		248	
Line 11: TOTAL RECEIPTS IN THE PERIOD		948	← 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 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
NOV 2013	Committee To elect Bruce Vogel	90 Bromfield NBPT MA	Marketing	2298
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				2298

