

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

Office of Campaign and Political Finance RECEIVED
OFFICE OFFICE NEWBURYPORT, MA

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: May 3	1, 2013 Ending Dale   SAug 30, 2013
Type of Report: (Check one)	30 day after election year-end report dissolution
Gregory Earls	Committee To Elect Greg Earls
Candidate Full Name (if applicable)	Committee Name
Mayor, City of Newburyport	Nell Bleicken (c: 978-979-0262)
Office Sought and District	Name of Committee Treasurer
25 Milk Street, Newburyport, MA 01950	25 Milk Street, Newburyport, MA 01950
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALANCE	E INFORMATION:
Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 11)	4,433.97
Line 3: Subtotal (line 1 plus line 2)	4,433.97
Line 4: Total expenditures this period (page 5, line	e 14) 3,538.98
Line 5: Ending Balance (line 3 minus line 4)	894.99
Line 6: Total in-kind contributions this period (page	ge 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: Institution for Saving	gs, Newburyport, MA
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 or behalf of this committee in Signed under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	x 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 activity, of all persons acting under the authority or on behalf of this committee in actineurred any liabilities nor made any expenditures on my behalf during this reporting	best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, a period.
Candidate without Committee OR Candidate with independent activity filing se 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 alithority or in behalf of this	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
$\sim 11. \text{ kg} \times 10^{-3} \text{ cm}^{-3}$	D. A. Con R. 2012

# 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.)

eport all receipts. Please include your committee name and a page number on each page.)				
Name and Residential Address (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)	
Date Received	(alphabetical listing required)	Amount	(tol contributions of \$200 or \$100 or	
Jul 11, 2013	Cheryl Amey, 24 Milk Street, Newburyport, MA 01950	100		
May 31, 2013	Lianne Bensley, 76 High Street, Newburyport, MA 01950	1.00		
Aug 15, 2013	Terry Berns, 130 Low Street, Newburyport, MA 01950	200	Retired	
Aug 3, 2013	Neil Bleicken, 8 Horton Street, Newburyport, MA 01950	1.00		
Jun 3, 2013	Yvonne Chabrier, 54 Prospect Street, Newburyport, MA 01950	100		
Jul 11, 2013	Yvonne Chabrier, 54 Prospect Street, Newburyport, MA 01950	50		
Jul 28, 2013	William Earls, 16 Deerfield Road, Wilton, CT 06897	100		
May 31, 2013	Joseph Fix, 2 Siverledge Road, Newbury, MA 01951	100		
May 31, 2013	Barbara Garins, 4-B Broad Street, Newburyport, MA 01950	100		
Aug 13, 2013	Barbara Garins, 4-B Broad Street, Newburyport, MA 01950	50		
May 31, 2013	William Harris, 56 Lime Street, Newburyport, MA 01950	100		
Jul 11, 2013	J Isabella ** address being researched **	100		
Line 9: Total Rec	cipts over \$50 (or listed above)	No. of the Control of		
Line 10: Total Rec	ceipts \$50 and under* (not listed above)			
	RECEIPTS IN THE PERIOD		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 A: RECEIPTS (continued)

Name and Residential Address  Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)	
Jul 11, 2013	Diana Kerry, 33 Temple Street, Newburyport, MA 01950	250	Educator, North Shore Community College	
Jun 17, 2013	L. Cletus Kijek, 12 Walnut Street, Newburyport, MA 01950	50		
Jul 10, 2013	L. Cletus Kijek, 12 Walnut Street, Newburyport, MA 01950			
Aug 16, 2013	James Knowlton, 17 Atwood Street, Newburyport, MA 01950	75		
Aug 30, 2013	Julie Menin, 83 Lime Street, Newburyport, MA 01950	100		
May 31, 2013	Nicholas Metcalf, PO Box 758, Newburyport, MA 01950	200	Finance, Self-Employed	
Jul 30, 2013	Nicholas Metcalf, PO Box 758, Newburyport, MA 01950	200	Finance, Self-Employed	
May 31, 2013	Stephanie Niketic, 93 High Street, Newburyport, MA 01950	250	Owner, Sutra, Inc.	
Jun 28, 2013	Stephanie Niketic, 93 High Street, Newburyport, MA 01950		Owner, Sutra, Inc.	
Jul 11, 2013	Eileen Peyton, 5 Colton Drive, Newburyport, MA 01950	1.00		
May 31, 2013	Michael Sales, 89 High Street, Newburyport, MA 01950	54		
Aug 15, 2013	Maurice Southworth, 12 Fruit Street, Newburyport, MA 01950	100		
Jul 11, 2013	Catherine Strauss, 48 Temple Street, Newburyport, MA 01950	70		
Line 9: Total Rec	eipts over \$50 (or listed above)	3,249		
Line 10: Total Red	ceipts \$50 and under* (not listed above)	1,184.97	* = See also authorized	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	4,433.97	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.

# COMMITTEE TO ELECT GREG EARLS - RECEIPTS ATTACHMENT

TOTAL	<u>Date</u> 11-Jul-13 31-May-13 31-May-13
	First Name Ashley Ellen Jane
2	Last Name Taylor Waters Wild
Sial Si	Address 87A Friend Street 30 Milk Street 760 Main Street
NAC.	City Amesbury Newburyport West Newbury
	State MA MA
9/8/200	ZIP 01913 01950 01985
% yaqq.qq	Check \$100.00 \$100.00 \$100.00

### 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.)

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Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Jul 27, 2013	Greetings By Design	1 Rear Water Street, Newburyport, MA 01950	Campaign Materials	428.85
Jul 3, 2013	Newburyport Daily News	23 Liberty Street, Newburyport, MA 01950	Advertisement	350
Jul 11, 2013	The Port Tavern	84 State Street, Newburyport, MA 01950	Function Charges	615.3
May 29, 2013	Vogel Printing	P.O. Box 127, Lawrence, MA 01842	Campalgn Materials	328.31
Aug 14, 2013	Vogel Printing	P.O. Box 127, Lawrence, MA 01842	Campaign Materials	623.69
Aug 22, 2013	Vogel Printing	P.O. Box 127, Lawrence, MA 01842	Campaign Materials	669.38
Aug 3, 2013	Yankee Homecoming	no known office	March In Parade	500
				and the same of th
	1	Line 12: Total Expenditures o	ver \$50 (or listed above)	
		Line 13: Total Expenditures \$5	50 and under* (not listed above)	23,45
	Enter on page 1, line 4 -	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	3,538.98

<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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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<u></u>		Line 12: Expenditures over	· \$50 (or listed above)	
Line 13: Expenditures \$50 and under* (not listed above)				
	Enter on page 1, line 4 -	Line 14: TOTAL EXPEN	DITURES IN THE PERIOD	The state of the s

<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 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
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		4333444		
			The state of the s	
				Lagrand Application Committee Commit
				The state of the s
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions	s \$50 & under (not listed above	)
	Enter on page 1, line 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
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		Line 18: TOTAL OUTSTAN	DING LIADII ITIES (ALL)	