

Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

Fil	11/2	th:

Massachusetts 100 F
ile with: ity or Town Clerk or Election Commission Please print or type all information, except signatures.
Fill in dates: Month Date Year Month Date Year Reporting Period Beginning 10 3/ // Ending /2 3/
Type of report: (Check one) □8th day preceding preliminary □8th day preceding election □30 day after election □year-end report □dissolution
Full Name of Candidate (Wapplicable) Councilor at Large Office Sought and District Residential Address Agnn Mass 01902 7815817174 Tel. No. (optional) Commetter to Elect Buyry Berton Committee Name Transcalla Address Name of Committee Treasurer Hickory Tel. No. (optional) Tomester to Elect Buyry Berton Committee Name Transcalla Address Hickory Tel. No. (optional) Transcalla Address Agnn Mass 01904 Transcalla Address Transcalla Address Hickory Berton Transcalla Address Hickory Berton Transcalla Address Hickory Berton Transcalla Address Hickory Berton Transcalla Address Hickory Transcalla Address Hickory Berton Transcalla Address Hickory Transcalla Address Hickory Transcalla Address Transcalla Address Hickory Transcalla Address Transcalla Address Hickory Transcalla Address Transcall
SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used Costern Bank
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: Treasurer's signature (in ink) Date
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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 campaig
finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.C.L. c. 55. I have not received an
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 campaig
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;

Candidate signature (in ink)

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 liemize 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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Name and Residential Address Amount Occupation & Employer Date (for contributions of \$200 or more) (alphabetical listing required) Received PODOX ELK 50 50 0 D 100 100 50 50 00 858 Line 9: Total receipts in excess of \$50 (or listed above) 500 Line 10: Total receipts \$50 and under* (not listed above) 00 Line 11: TOTAL RECEIPTS IN THE PERIOD 1350 00 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.

Page 2

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.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

number on each page.

umber on each Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	·			
	·			
		Line	12: Expenditures over \$50	
			13: Expenditures \$50 and under*	
1	Enter on page 1, line 4		14:TOTAL EXPENDITURES	

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 3

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
•				
		· · · · · · · · · · · · · · · · · · ·		
	<u> </u>		In-kind over \$50	<u> </u>
	L	Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	

^{*} 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.

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	
		•	<u> </u>	
-				
	Enter on page 1, line 7	Line 18: OUTSTANDING LIABILITIES (ALL)		

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

Page 4



Schedule E Disclosure of Assets Statement Office of Campaign and Political Finance

File with: Director				
Office of Campaign and Political Finance One Ashburton Place Boston, MA 02108 (617) 727-8352			CPF ID#	,
This form should be filed by	all candidates	and committees with each	year end and each dis	solution report.
Committee Name:		Date of report:		
All ca	ındidates and c	ommittees must fill in p	art A <u>or</u> part B.	
Part A:				
☐ No assets* were acquired or disp	oosed of by this	candidate/committee dur	ing the period covered	by this statement.
Part B: <u>Assets acquired:</u> List all assets acquired: have filed, list all assets.	ired since the co	ommittee last filed this st	atement. If this is the fi	rst Schedule E you
Asset Include year, model or other identifying information, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value
Assets disposed of: List all assets so	old traded or tra	insferred during the renor	ting period covered by	his statement
Asset Include year, model or other identifying information, if applicable.	Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	Disposition Value Attach statement of how value is determined.
·				
Assets acquired by a political committee mu	ust be used for the	political purpose for which th	e committee is organized an	d must remain the property
of that committee. Assets may be disposed				a mast romani are property
*An asset is defined as any one item that hat a cost/value of \$1,000 or more at the time of		ore than one year, would be o	lepreciable in a normal busin	ness environment, and has
Signed under the penalties of perjury:		Sig	ned under the penalties of p	erjury:
Candidate signature Date	<u> </u>	Tro	easurer signature	Date

Attach additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.

5/95