



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-2024 Ending Date: 12-31-2024

Type of Report: (Check one)

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

Thomas Lloyd Gould
Candidate Full Name (if applicable)
Councilor - At-Large
Office Sought and District
9 Abington Ave Peabody MA
Residential Address
E-mail: tomgould@mytreehills.com
Phone #: 978-531-7374

Committee to Elect Tom Gould
Committee Name
Susan J Gould
Name of Committee Treasurer
9 Abington Ave Peabody MA
Committee Mailing Address
E-mail: sgould@council.com
Phone #: 978-531-7374

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>12,370.67</u>
Line 2: Total receipts this period (page 3, line 12)	<u>100.-</u>
Line 3: Subtotal (line 1 plus line 2)	<u>12,470.67</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>200.-</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$12,270.67</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	
Line 7: Total (all) outstanding liabilities (page 7, line 19)	
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	
Line 9: Name of bank(s) used:	<u>Eastern Bank</u>

CITY OF PEABODY
2024 DEC 29 PM 12:31
CITY CLERK

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: Susan J Gould (Treasurer's signature)

Date: 12-30-24

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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 that are not otherwise disclosed in this report.

Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature)

Date: 12/30/24

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
12.21.24	maureen Leonard 45 Garden St W. Newbury 01985	\$ 100.-	
Line 9: Total Receipts over \$50 (or listed above)		100.-	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$100.-	← 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.

