



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Ending Date:

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Candidate Full Name (if applicable)

Office Sought and District

Residential Address

Telephone Number (optional):

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<input type="text" value="\$0.00"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="\$2,935.00"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="\$2,935.00"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="\$2,197.57"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="\$737.43"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text" value="\$0.00"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text" value="\$201.27"/>
Line 8: Name of bank(s) used:	<input type="text" value="Eastern 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) 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 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: (Candidate's signature) Date:

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.

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5/29/15	Anthony Tsapatsaris Ethel Avenue, Peabody, MA	\$100.00	
5/29/15	Walter and Carol Eells Hartford, CT	\$100.00	
5/29/15	John Sacramone Peabody, MA	\$100.00	
5/30/15	Lorraine and John Adams 4 Columbus Road, Peabody, MA	\$100.00	
5/30/15	Justin Diamond 9 Columbus Road, Peabody, MA	\$100.00	
5/30/15	Richard Jarvis 85 Gardner Street, Peabody, MA	\$100.00	
5/30/15	Michele & Dennis Feld P.O. Box 221, Peabody, MA	\$100.00	
5/30/15	Michael and Liane Harrington 5 Columbus Road, Peabody, MA	\$150.00	
5/30/15	David & Stephanie McGeney 52 Samoset Road, Peabody, MA	\$100.00	
5/30/15	Herbert & Susan Levine 14 Hamilton Road, Peabody, MA	\$100.00	
5/30/15	Ross Kolhonen 198 Lowell Street, Peabody, MA	\$100.00	
5/30/15	Marjorie Chase 67 Ellsworth Road, Peabody, MA	\$100.00	
5/30/15	Candace and Richard Tobin 1 Prospect Street, Peabody, MA	\$150.00	
5/30/15	Mark & Joan Bedard 11 Jennifer Lane, Peabody, MA	\$75.00	
5/30/15	John & Linda Dullea 7 West Diane Road, Peabody, MA	\$75.00	
5/30/15	The Slattery Committee 20 Orchard Street, Peabody, MA	\$75.00	
5/30/15	John Tierney 21 Settlers Way, Salem, MA	\$60.00	

The Committee to Elect Ed Charest

8/11/15	Barbara Walsh 37 Olympia Street Moultonboro, NH	\$75.00	
Line 9: Total receipts in excess of \$50 (or listed above)		\$1,760.00	
Line 10: Total receipts \$50 and under * (not listed above)		\$1,175.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$2,935.00	

*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 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
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
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
5/27/15	Ed Charest	Peabody, MA	Kappy's – Fundraiser	\$201.27
Line 18: OUTSTANDING LIABILITIES (ALL)				\$201.27