

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

LYNN ELECTION OFFICE

2011 JAN 18 P 1: 36

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City or Town Clerk or Election Commission Please print or type all information, except signatures. Fill in dates: Reporting Period Beginning Type of report: (Check one) ☐8th day preceding preliminary ☐8th day preceding election □30 day after election □year-end report □dissolution CARVIN ANDERSON Full Name of Candidate (if applicable) NOT AT YHIS TIME Office Sought and District 12 CONCORD ST X % 12 CONCORD ST. *3 . Residential Address Committee Mailing Address 201-599-4666 LYNY. Tel. No. (optional) Tel. No. (optional) 781-599-1466 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 METRO CREDIT 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, leans, 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) 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 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 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.

Date Received (alphabetical listing required). P5,00 for month automatically placed, into account from candidates. Desonal Clarking acct. Lie Credit aumo System.	Occupation & Employer (for contributions of \$200 or more)	
jua credit nimo Syllem		
jua credit nimo Syllem		
jua credit nimo Syllem		
Line 9: Total receipts in excess of \$50 (or listed above)		
Line 10: Total receipts \$50 and under* (not listed above)		
Line 11: TOTAL RECEIPTS IN THE PERIOD 60 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.

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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	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
	ter en				
	- <u>.</u>				
			<u> </u>		
	•				
		<u> </u>			
		· .			
	·				
- · 			Expenditures over \$50		
			Expenditures \$50 and under*		
E	Enter on page 1, line 4	Line 14	TOTAL EXPENDITURES	0	

^{*}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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	·			
•				
·				<u>.</u>
		Line 15: 1	In-kind over \$50	
		Line 16: 1	in-kind \$50 and under	
Enter on page 1, line 6 Line 17: Total In-kind		Fotal 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
			1	
	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.

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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	<u> </u>
This form should be filed b	y all candidates	and committees with each	h vear end and each dis	solution report
Committee Name: ANDERSO	ON'S YOUR	1		eport: 1-15-201
All ca	andidates and c	committees must fill in p	art A <u>or</u> part B.	
Part A:	/			
No assets* were acquired or dis	posed 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 sta	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
			e e	
Assets disposed of: List all assets so Asset Include year, model or other identifying information, if applicable.	Date Acquired	nsferred during the repor Disposition to: Name and Address	ting period covered by t Date and Manner of Disposition	his statement. Disposition Value Attach statement of how value is determined.
Assets acquired by a political committee mu of that committee. Assets may be disposed	st be used for the p	political purpose for which the must be disposed of prior to d	committee is organized and issolution.	I must remain the property
*An asset is defined as any one item that has a cost/value of \$1,000 or more at the time of	s a useful life of mo	ore than one year, would be d	epreciable in a normal busin	ess environment, and has
Signed under the penalties of perjury: Candidate signature Date	10	2011	asurer signature	Pate Date
Attach additional sheets, if necessary	, to disclose all a	assets acquired or dispose	ed of in a reporting perio	od. 5/95 1-