

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2012	2
JAN	J. W.
20	LECT
D	NOI
_	0
···	JI 3

File with:

Please print or type all information, except signatures.
Reporting Period Beginning Date Pear Delte Pear Delte Pear Pear
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 (if applicable) Committee Name Committee Name Committee Name Committee Treasurer Name of Committee Treasurer Name of Committee Mailing Address Committee Mailing Address Tel. No. (optional)
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 EASTERN BALANCE INFORMATION: \$\frac{4}{28.70}\$ \$\frac{100.00}{28.70}\$ Line 8: Name of bank(s) used

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 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.

 \square Candidate without Committee \underline{OR} Candidate with independent activity filling 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 commain 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:

(DIDIO)	V.Fill	· 120
Candidate signature (in ink)		7

D. DiFillipo

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, CPF ID# and a page number on each page.

page number on each page.						
Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or mor		
11/3/11	RFC Financial B. Control	100	00			
11/10	RFC Financial B. Control Diane Kallogher	50	00			
/						
			,			
		<u> </u>				
-		-	 			
		-				
		 				
Line 9:	Total receipts in excess of \$50 (or listed above)	150	00			
Line 10:	Total receipts \$50 and under* (not listed above)	0				
	TOTAL RECEIPTS IN THE PERIOD	150	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

hotis bun lan.Albuminge

3. College Schener and season ordered derived address has paparent, his alphabetic of order of the college area of the college of the season of the college of the colle

面次 经基础 医生物 电超过电极电路	EK#	derin.		1973.Ca
organistic edimentare with		and the second s	(two trans givensil in distribution giv)	a who with
	$\Delta_{\rm o}$		All interest of the	1
:	•	. بخيل بـ		
	<u></u>	المياد والمحمود		
		aa magaagaada ad na d		
The state of the s				
		****	The second secon	-
The second secon				
and the second s				· ·
•			the second secon	<u> </u>
	22	100	(arode brasilito) del respecto y rise de la la r (arode basel (ge)) et escesa del arcice escale	

Therefore the same of the contract of the same of the

.

D. DiFillipo

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, CPF ID#

and a page number on each page.

and a page number on each page.						
Date Paid	To Whom Paid (alphabetical listing)	Address	Amount			
11/4/11	Calnan Family	Lynn, Mass	bonation	100	00	
12/10	Shades of Gray	Lynn Mass.	mation	50	00	
12/10	Project Cope	Lynn yas.	Donation	50	00	
12/14	Payment credit	toud Ynn M	Payment	960	00	
/	Mc Camp	aign Liabilita	1-D.DiFillip	0		
		0				
			·			
	<u>. </u>	Line 12:	Expenditures over \$50	1260	00	
		Line 13:	Expenditures \$50 and under*	8		
	Enter on page 1, line 4	Line 14:	TOTAL EXPENDITURES	160	20	

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

D. DiFillipo

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
				0
			· · · · · · · · · · · · · · · · · · ·	-
		Line 15: I	n-kind over \$50	
		Line 16: I	n-kind \$50 and under	
	Enter on page 1, line 6	Line 17: 7	Total In-kind	5

^{*} 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
*	ongou	9 D.DIFILIPO	10 HERMON RI)	Campaign	2818.70
	2011-	MC-Credit Can	d Lynn, MA.	Purchases	
	2012				
				•	
		Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	2818.70

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

D.DiFillipo



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

of Massachmostts			*	
File with: Director				
Office of Campaign and Political Finance One Ashburton Place Boston, MA 02108 (617) 727-8352			CPF ID	#
	of tox	and committees with each	Date of I	report: 12/3/12
Part A:				
No assets* were acquired or disp	osed 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 f	irst Schedule E you
Asset Include year, model or other identifying information, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value
N/A.				
Assets disposed of: List all assets sol	ld, traded or tra	nsferred during the repor	ting period covered by	this 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.
N/A.		e:		

Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.

*An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.

Signed under the penalties of	perjury:	
1./		() ()
LY/OULVIT	ellin.	12/3/19711
Candidate signature	Date	7-1/2 011
	/	. /

Signed under the penalties of perjury:

urer signature Pate

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

5/95