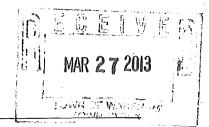


Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance



File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates: Reporting Period Beginning JAN 20	Month	Date 23	Year 2013
Type of report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	n □30 day after election	□year-end report	□dissolution
Full Name of Candidate (if applicable) Soloct Max Office Sought and District Down Ave Cosperate Residential Address 58 - 566 - 4621 Tel. No. (optional)	DAY/ON Name of Com	ttee Name C / Nof-Class mittee Treasurer Aailing Address A O 25 7/ Tel. No.	Selectors SOF-685- (optional)
SUMMARY BALAI	NCE INFORMATION	: :)
Line 1: Ending balance from pre	vious report	\$	
Line 2: Total receipts this period	(page 2, line 11)	\$ 2/33//	6
Line 3: Subtotal (line 1 plus line 2)		\$ 2/33./	4
Line 4: Total expenditures this p		\$ 881.1	$\frac{8}{8}$
Line 5: Ending balance (line 3 minus	line 4)	\$ 1251.5	
Line 6: Total in-kind contributions	this period (page 4)	\$ 15.00	00
Line 7: Total (all) outstanding liab	_	\$ 2/23.	00
Line 8: Name of bank(s) used			
	·		ノ
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and campaign finance activity, including all contributions, loans, receipts, expend and represents the campaign finance activity of all persons acting under the M.G.L. c. Signed under the penalties Treasurer's signature (in ink)	litures, disbursements, in-kind cont authority or on behalf of this cor of perjury:	ributions and liabilities to numittee in accordance wit	r this reporting period
FOR CANDIDATE FILINGS ON	LY: (CANDIDATE MUST SIG	N BELOW)	
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the commit I certify that I have examined this report including attached schedules and campaign finance activity, of all persons acting under the authority or on have not received any contributions, incurred any liabilities nor made any ex Candidate without Committee OR Candidate with independent activity I certify that I have examined this report including attached schedules and campaign finance activity, including contributions, loans, receipts, expending and represents the campaign finance activity of all persons acting under the M.G.L. c. 55.	it is, to the best of my knowledge a behalf of this committee in accord benditures on my behalf during this ty filing separate report it is, to the best of my knowledge a tures, disbursements, in-kind contri- authority or on behalf of this con-	ance with the requirement reporting period. and belief, a true and com- ibutions and liabilities for	plete statement of all this reporting period
Candidate signature (in ink)		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 Name and Residential Address Received (alphabetical listing required)		Am	ount		
3/15/2013	2371 (MANSELLY HOLY M	250	00	2371 CANDERTY TO	
3/22/2017	9 Stockfor Short Cuf WARLHAMING 02571	500	00	Robertsons Come No 128 WANGERMAN NA 025	
128/13	wayne sylvester 121 Hathaway st wantan in 22571	357	13	a line	
3/11/13	patail Tropearo	344	03	Chalher Oil 28 A Barkone, MA	
3/23/	Dich wheeler 5100 25 30046 5100 onset, na 02558	300.	00	MeLined	
	•				
		·			
				·	
		,			
			·		
	·	,			
		·			
	otal receipts in excess of \$50 (or listed above)	1751	16		
<u> </u>	otal receipts \$50 and under* (not listed above)	382	00		
ine 11: T	OTAL RECEIPTS IN THE PERIOD	2/33	16	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.

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.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Am	ount
2/11/2	Home Ochet	HOLF CHANGETY	- 1925		
3/10/13	hones	2421 Cashay	thy Bajos	/35	62
3/11/13	Home Depot	2994 Cranbery Charchan M	Hay Syns	134.	53
3/2/13	Home Depot	LAGY ensuber	Hay .	86.	33
3/22/17	wanehan	219 main st WARRAMINA	ADD	180	00
13/28/13	Home Difet	2994 Casibery	fay signs	263.	28
1					
·					
•.					
		Line 12: E	Expenditures over \$50	801	76
•		Line 13: E	expenditures \$50 and under*	79	42
Enter on page 1, line 4 Line 14:TOTAL EXPENDITURES		881	18		

^{*}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
3/22/	ChuyLL L. NOSCY	11 Bog INON & WANHAM, MA 02576	ose of space + pastnies	150 00
		•		
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
,	Enter on page 1, line 6	Line 17:	Total In-kind	150 00

^{*} 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	To Whom Due	Address	Purpose	Amount
Incurred				
3/1/13	Short shall	Warnhay pro	Signs	825,00
3/22/13	Postmasta	coprebary, MA	mailing	703 00
3/22/13	INDJE 76	6 Little Grown	MAIL	59500
			· · · · · · · · · · · · · · · · · · ·	
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	2/230

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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