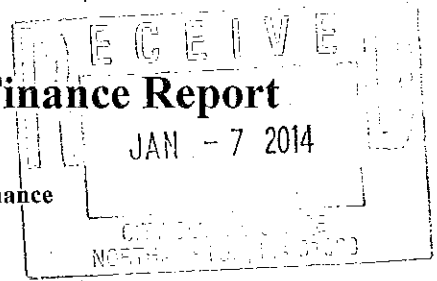


Form CPF M 102: Campaign Finance Report Municipal Form

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="3,393.81"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="895"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="4,288.81"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="3,999.8"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="289.01"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text" value="3,802"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text"/>
Line 8: Name of bank(s) used:	<input type="text" value="Florence Savings 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.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, 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)
Oct 20, 2013	Craig Dreeszen 33 Bardwell St Florence MA	50	
Oct 31, 2013	Frederick U. Fierst 10 Park Street Florence MA	100	
Oct 29, 2013	Mary Finn 274 Pleasant Street Northampton MA	250	Practice Manager/Optical Studio, Northampton MA
Oct 29, 2013	Michael L. Kesten 60 Water Street Leeds MA	50	
Oct 22, 2013	Mary Jenifer McKenna 89 Florence Street Leeds MA	100	
Oct 23, 2013	Rowena Roodman 26 Grove Avenue Leeds MA	50	
Oct 28, 2013	David Stevens 1378 Westhampton Rd Florence MA	100	
Line 9: Total Receipts over \$50 (or listed above)		700	
Line 10: Total Receipts \$50 and under* (not listed above)		195	
Line 11: TOTAL RECEIPTS IN THE PERIOD		895	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: **TOTAL RECEIPTS IN THE PERIOD**

← 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.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, 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	Amount
Nov 12, 2013	Collective Copies	71 S. Pleasant Street Amherst, MA 01002	Printing	993.73
Nov 16, 2013	Cooper's Corner	Main Street Florence, MA 01060	Food	66.71
Nov 5, 2013	Cup and Top	1 North Main Street Florence, MA 01060	Food and facility rental	753
Oct 29, 2013	Daily Hampshire Gazette	115 Conz Street Northampton, MA 01060	Political advertisement	1,338
Oct 29, 2013	Daily Hampshire Gazette	115 Conz Street Northampton, MA 01060	Political advertisement	334.5
Oct 31, 2013	US Postal Service/Postmaster	Leeds, MA 01053	Mailing	279.2
Oct 31, 2013	US Postal Service/Postmaster	Leeds, MA 01053	Mailing	125.92
Nov 1, 2013	US Postal Service/Postmaster	Leeds, MA 01053	Stamps	66
Line 12: Total Expenditures over \$50 (or listed above)				3,957.06
Line 13: Total Expenditures \$50 and under* (not listed above)				42.74
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				3,999.8

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures 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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Nov 6, 2013	Heidi Stevens	8 Upland Road Leeds MA 01053	Graphic design services	3,802

Line 15: In-Kind Contributions over \$50 (or listed above)	3,802
Line 16: In-Kind Contributions \$50 & under (not listed above)	
Line 17: TOTAL IN-KIND CONTRIBUTIONS	3,802

Enter on page 1, line 6 →

* 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

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)**