

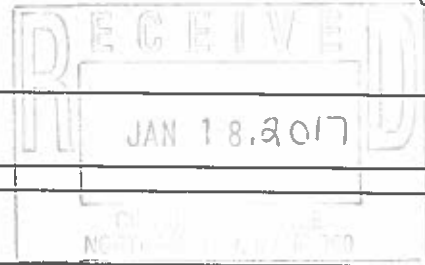


Commonwealth
of Massachusetts

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

File with: Director
Office of Campaign and Political Finance
One Ashburton Place Rm. 411
Boston, MA 02108
(617) 979-8300

CPF ID# 16344



Reporting Period: Beginning: 1/1/2016 Ending: 12/31/2016

Type of Report: 2016 Year-end report (MUN)

<p><u>Dwight, William H.</u> <i>Full Name of Candidate</i></p> <p><u>Municipal, Northampton</u> <i>Office Sought/ District</i></p> <p><u>39 Myrtle Street</u> <u>Northampton, MA 01060</u> <i>Residential Address</i></p>	<p><u>William Dwight Committee</u> <i>Committee Name</i></p> <p><u>William Scher</u> <i>Name of Committee Treasurer</i></p> <p><u>145 State Street</u> <u>Northampton, MA 01060</u> <i>Committee Address</i></p>
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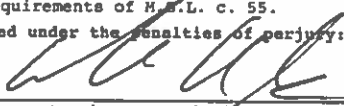
SUMMARY BALANCE INFORMATION

Ending balance from previous report:	\$1,616.20
Total receipts this period:	\$0.00
Subtotal:	\$1,616.20
Total expenditures this period:	\$1,350.03
Ending Balance:	\$266.17
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Total inkind contributions this period:	\$0.00
Total outstanding liabilities:	\$0.00
Name of Bank Used:	Florence Bank, Paypal

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, inkind 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 1/18/17

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, and 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 and 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, inkind 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:

 _____

Date 1/18/17

Candidate's signature (in ink)

Date

WD

1/18/17

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 over \$50 and under may be added together from committee records, and reported on line 13.

<u>Date</u>	<u>Name and Address</u>	<u>Amount</u>	<u>Purpose</u>
1/13/2016	Collective Copies 93 Main Street Florence, MA 01062	\$508.39	Printing
4/30/2016	Dreamhost Pmb #257, 417 Associated Rd. Brea, CA 92821	\$119.40	Website Hosting
1/19/2016	Lewis, Alida 39 Myrtle Street Northampton, MA 01060	\$217.51	Liability Payment
1/19/2016	Scher, William 145 State Street Northampton, MA 01060	\$394.10	Liability Payment
1/19/2016	Wight, Kathleen 20 Northern Ave Northampton, MA 01060	\$110.63	Liability Payment
Total Itemized Expenditures:		\$1,350.03	
Total Unitemized Expenditures:		\$0.00	
Total Expenditures:		<u>\$1,350.03</u>	

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 the liabilities incurred during this reporting period.

<u>Date</u>	<u>To Whom Due</u>	<u>Amount</u>	<u>Purpose</u>
12/31/2015	Lewis, Alida 39 Myrtle Street Northampton, MA 01060	\$217.51	
1/19/2016	Lewis, Alida 39 Myrtle Street Northampton, MA 01060	(\$217.51)	Liability Payment
12/31/2015	Scher, William 145 State Street Northampton, MA 01060	\$394.10	
1/19/2016	Scher, William 145 State Street Northampton, MA 01060	(\$394.10)	Liability Payment
12/31/2015	Wight, Kathleen 20 Northern Ave Northampton, MA 01060	\$110.63	
1/19/2016	Wight, Kathleen 20 Northern Ave Northampton, MA 01060	(\$110.63)	Liability Payment
	Total Liabilities:	<u>\$0.00</u>	