



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2017 OCT 30 PM 3:50

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date: 8/21/2017

Ending Date: 10/30/2017

CITY CLERK
SALEM, MASS.

Type of Report: (Check one)

☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Ana P. Campos

Candidate Full Name (if applicable)

Ward 4 Councillor

Office Sought and District

17 Orleans Avenue, Salem, MA 01970

Residential Address

E-mail: apcampos@gmail.com

Phone # (optional):

Committee to Elect Ana Campos for Ward 4

Committee Name

Laura Rafuse

Name of Committee Treasurer

17 Orleans Avenue, Salem, MA 01970

Committee Mailing Address

E-mail: camposward4@gmail.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 11)

1,735

Line 3: Subtotal (line 1 plus line 2)

1,735

Line 4: Total expenditures this period (page 5, line 14)

1,454.46

Line 5: Ending Balance (line 3 minus line 4)

280.54

Line 6: Total in-kind contributions this period (page 6)

118.27

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used: Salem Five

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: 10/30/2017

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)
9/6/2017	Amy Hirschcron, 1 Hazel Terrace Apt. 2, Salem, MA	100	
9/10/2017	Betsy August, 432 Puritan Rd, Swampscott, MA	100	
9/2/2017	Erica Feldmann, 26 R. Chestnut St., Salem, MA	50	
10/2/2017	Helaine Berg, 9 Nightingale Lane, Salem, MA	60	
9/8/2017	Jeremy Palumbo, 15 Cypress Road, Medford, MA	250	Senior Consultant, Cambridge Computer
9/12/2017	John Boris, 5 Bedford Street, Salem, MA	50	
10/26/2017	John Boris, 5 Bedford Street, Salem, MA	300	Retired
9/14/2017	Julia Farwell-Clay, 675 Sudbury Street, Concord, MA	100	
9/10/2017	Kimberley Driscoll, 16 Glenn Ave, Salem, MA	50	
9/10/2017	Liz Bradt, 22 Larchmont Road, Salem, MA	50	
10/13/2017	Marsha Finkelstein, 2 Clifton Ave, Salem, MA	50	
8/31/2017	Patti Morsillo, 53 Broad Street, Salem, MA	50	
Line 9: Total Receipts over \$50 (or listed above)		1,360	
Line 10: Total Receipts \$50 and under* (not listed above)		375	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,735	← 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)
9/22/2017	Patricia Patti, 11 Willard Lane, Lynnfield, MA	100	
9/14/2014	Sheeri Cabral, 69 Child Street, Hyde Park, MA	50	
Line 9: Total Receipts over \$50 (or listed above)			← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

* 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
9/14/2017	A&J King Artisan Bakers	139 Boston Street, Salem, MA	Campaign Event Fee	150
9/26/2017	The Scarlet Letter Press & Gallery	10 Colonial Road #14, Salem, MA	Campaign Literature	227.37
9/26/2017	Thriftco Printing	56 Pulaski Street, Peabody, MA	Lawn Signs	275.85
10/28/2017	Thriftco Printing	56 Pulaski Street, Peabody, MA	Ballot Stickers	150
10/28/2017	Thriftco Printing	56 Pulaski Street, Peabody, MA	Ballot Stickers	420.54
Line 12: Total Expenditures over \$50 (or listed above)				1,223.76
Line 13: Total Expenditures \$50 and under* (not listed above)				230.7
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				1,454.46

* 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/26/2017	USPS	2 Margin Street		
			Line 12: Expenditures over \$50 (or listed above)	
			Line 13: Expenditures \$50 and under* (not listed above)	
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	

* 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
8/23/2017	Jeff Cohen	12 Hancock Street, Salem, MA	Gift card to Scarlet Letterpress	100
		Line 15: In-Kind Contributions over \$50 (or listed above)		100
		Line 16: In-Kind Contributions \$50 & under (not listed above)		18.27
Enter on page 1, line 6 →		Line 17: TOTAL IN-KIND CONTRIBUTIONS		118.27

* 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
None	None	None	None	0
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				0