

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

le with: ty or Town Clerk or Election Commission Please print or type all in	nformation, except signatures. 2011 100 17 50 12: 11
	Year Month Date Year OF Ending DECEMBER 31 2010
Type of report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding elections.	on □30 day after election ⊠year-end report □dissolution
Full Name of Candidate (if applicable) COUNCILLOR Office Sought and District 26 MARLBORDIGH RD SALEM, MARL9720 Residential Address Tel. No. (optional)	Committee 70 ELECT CHUCK BAKTON Committee Name THERES A SALEM MA CATTO Committee Mailing Address Tel. No. (optional)
Line 1: Ending balance from pro Line 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this p Line 5: Ending balance (line 3 minus Line 6: Total in-kind contributions Line 7: Total (all) outstanding liab Line 8: Name of bank(s) used	\$ \text{\$\pi\$ (page 2, line 11)} \$ \$\pi\$ \$ \text{\$\pi\$ \$\text{\$\pi\$ \$\text
campaign finance activity, including all contributions, loans, receipts, expen	it is, to the best of my knowledge and belief, a true and complete statement of all aditures, disbursements, in-kind contributions and liabilities for this reporting period the authority or on behalf of this committee in accordance with the requirements of sof perjury:
FOR CANDIDATE FILINGS OF	NLY: (CANDIDATE MUST SIGN BELOW)
campaign finance activity, of all persons acting under the authority or on have not received any contributions, incurred any liabilities nor made any examined committee OR Candidate with independent activity certify that I have examined this report including attached schedules and campaign finance activity, including contributions, loans, receipts, expend	it is, to the best of my knowledge and belief, a true and complete statement of all behalf of this committee in accordance with the requirements of M.G.L. c. 55. I spenditures on my behalf during this reporting period. **Ity filing separate report** it is, to the best of my knowledge and belief, a true and complete statement of all itures, disbursements, in-kind contributions and liabilities for this reporting period be authority or on behalf of this committee in accordance with the requirements of

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

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		The state of the s		
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Line 9: Total	receipts in excess of \$50 (or listed above)			
Line 10: Total	receipts \$50 and under* (not listed above)			
	AL 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.

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	Amount
PLANTAGE AND ADDRESS OF THE PL				
			·	
		,		
		474		
		Line 1	2: Expenditures over \$50	
			3: Expenditures \$50 and under*	
En	ter on page 1, line 4	Line 1	4:TOTAL EXPENDITURES	

^{*}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 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
Neccivea				
				Assessed of Communication
				ALL
				1
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	

^{*} 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: OUTSTANDING	LIABILITIES (ALL)	

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.