

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

of Massachusetts	
File with: City or Town Clerk or Election Commission	201? JAN -4 P 3: 1 h
Please print or type all inform	mation, except signatures
Fill in dates: Reporting Period Beginning October 22, 2011	Month CLERKO'S OFFICE YEAR Ending December 31, 2011
T	
Type of report: (Check one) □8th day preceding preliminary □8th day preceding election	□30 day after election Xyear-end report □dissolution
James M. Fleming	The Floring Committee
Full Name of Candidate (if applicable)	Committee Name
School Committee	Francis G. Pelletier
Office Sought and District	Name of Committee Treasurer
47 Buffin Street	47 Buttum Street
Residential Address	Committee Mailing Address
Salem Ma 01970	Salen, Mai 01970
(978) 590-6565 Tel. No. (optional)	
7110/3 10 308	(978) 590-6565 Tel. No. (optional)
SUMMARY BALANCE Line 1: Ending balance from previo	us report \$ 352,62
Line 2: Total receipts this period (page	ge 2, line 11) \$
Line 3: Subtotal (line 1 plus line 2)	\$ 352,62
Line 4: Total expenditures this perio	od (page 3, line 14) \$ 194,47
Line 5: Ending balance (line 3 minus line	4) \$ <u> 58</u> ; 15
Line 6: Total in-kind contributions this	period (page 4) \$ 0.00
Line 7: Total (all) outstanding liabilitie	S (page 4) \$ 1806,00
Line 8: Name of bank(s) used Crtize	in's Bank Perbady Man
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the finance activity, including all contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of this Signed under the penalties	is, in-Kind contributions and liabilities for this reporting period and represents the committee in accordance with the requirements of M.G.L. c. 55.
Francis & Pelletin	1-2-12
Treasurer's signature (in ink)	Date
FOR CANDIDATE FILINGS ONI	Y: (CANDIDATE MUST SIGN BELOW)
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 h	sest 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 committe contributions, incurred any liabilities nor made any expenditures on my behalf during the	us reporting period
Use Candidate without Committee OR Candidate with independent activity filing.	tenarate rennet
I certify that I have examined this report including attached schedules and it is, to the binance activity, including contributions, loans, receipts, expenditures, disbursements, is a maxim finance activity of all persons activity of the contributions.	in-kind contributions and liabilities for this removing annial and any
campaign makes activity of an isocons acting under the authority or on behalf of this c	committee in accordance with the requirements of M.G.L. c. 55
Signed under the penalties of pe	rjury:
Condidate American Constitution of the Condidate American Condition of the C	1/1/12
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 Received	Name and Residential Address (alphabetical listing required)		nount	Occupation & Employer (for contributions of \$200 or more	
	No Receipts this) (OC		
	period	ab control of the con			
	,	A CONTRACTOR AND A CONT	decembed instances property of the control of the c		
and the second s		Gradino delli lora comi materia.			
Line 0: T	Total receipts in excess of \$50 (or listed above)				
	otal receipts \$50 and under* (not listed above)	0	00		
	OTAL RECEIPTS IN THE PERIOD	0	00	Fater on page 1 line 2	
Line II: I	OTAL RECEIFIS 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.

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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	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
Company of the Compan	Largette Associates	13 Broadwy Salem, Ma 0970	Hall Rental	136	5
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				amatan in maka maka maka maka maka maka maka mak	
				arrak dagakan manan m	
				Methodoromic or communication is a consequence of public project, and	
Videfamilia i managari en sana.					
					The state of the s
Providence of the control of the con		Line 12: E	xpenditures over \$50	13"	50
	Parameter (xpenditures \$50 and under*	62	97
Er	nter on page 1, line 4		OTAL EXPENDITURES	194	11-

^{*}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
	None			0
		Line 15:	In-kind over \$50	0,00
			In-kind \$50 and under	0,00
	Enter on page 1, line 6	Line 17:	Total In-kind	0.00

^{*} 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 Incurred	To Whom Due	Address	Purpose	Amount
10/22/07	James M. Fleming	Ualem 11 10 (2) (7 10)	Loan	300,00
10/23/07	James M. Flenny	own out 5	Loan	1500.00
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undergraf det de la maioria de la maiori				
and the second s	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	1800.00

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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