

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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ile with: City or Town Clerk or Election Commission	•
Please print or type all in	nformation, except signatures CLTY OF SALEM. MA
	Tear Month Date 31 2014
Type of report: (Check one) ☐8th day preceding preliminary ☐8th day preceding electrons	ion □30 day after election v year-end report □dissolution
STEVEN A PINTO Full Name of Candidate (if applicable) WARD COUNCILLOR Office Sought and District 55 COLLIBUS AVE Residential Address SALEM MA 01970 Tel. No. (optional)	THE PINTO COMMITTEE Committee Name AIOAN P BUNTING Name of Committee Treasurer 96 BAY VIEW AVE Committee Mailing Address SALEM MA 01970 Tel. No. (optional)
SUMMARY BALAN Line 1: Ending balance from prev Line 2: Total receipts this period a Line 3: Subtotal (time 1 plus time 2) Line 4: Total expenditures this pe Line 5: Ending balance (time 3 minus 1) Line 6: Total in-kind contributions th Line 7: Total (all) outstanding liabilit Line 8: Name of bank(s) used	(page 2, line 11) \$ 0 \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
campaign finance activity of all persons acting under the authority or on behalf of Signed under the pena. Treasurer's signature (in ink)	Date Date
FOR CANDIDATE FILINGS O	NLY: (CANDIDATE MUST SIGN BELOW)
Affidavit of Candidate: (check I 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 finance activity, of all persons acting under the authority or on behalf of this corn contributions, incurred any liabilities nor made any expenditures on my behalf durity.	the best of my knowledge and belief, a true and complete statement of all campaign muttee in accordance with the requirements of M.G.L. c. 55. I have not received any ing 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 linance activity, including contributions, leans, 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.

Agned under the penalties of perjury:

Candidate signature (in ink)

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.)

Name and Residential Address			Occupation & Employer		
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)		
			1 minutes		
A					
1					
			2		
ine 9: Total Receir	ots over \$50 (or listed above)	0			
- Total resorpts over 400 (or nated accord)					
ine 10: Total Receipts \$50 and under* (not listed above)					
	Tana Tanan umumin manar na ma				
44 750 751 4 75	ECEIPTS IN THE PERIOD	0	← 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)

Name and Residential Address Occupation & Employer					
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)		
		<u></u>			
A CAMPAGA					
		and the same of th			
	-				
Line 9: Total Receip	ots over \$50 (or listed above)	0	A		
Line 10: Total Recei	pts \$50 and under* (not listed above)	0			
Line 11: TOTAL R	ECEIPTS IN THE PERIOD	0	← Enter on page 1, line 2		
	receipts of \$50 and under include them in line				

^{*} 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.)

eport an expen	report all expenditures. Please include your committee name and a page number on each page.) To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
Date Faid	(aiphabetical listing)	Audress	Turpose of Expenditure	Amount	
Mar 13, 2014	Connolly Printing	178 Gill St, Woburn MA 01801	Printing	400	
		Line 12: Total Expenditures ov	er \$50 (or listed above)	400	
		Line 13: Total Expenditures \$50) and under* (not listed above)	0	
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	0	

^{*} 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)

To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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				A CONTRACTOR OF THE CONTRACTOR
				market market by the state of t
				at an any an
				Phi friedrice and
		Line 12: Expenditures over \$50	(or listed above)	400
	a a	Line 13: Expenditures \$50 and t	under* (not listed above)	0
		Line 14. TOTAL EVDENDITE	LIDES IN THE PEDIOD	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD O If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized				

^{*} 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
		Line 15: In-Kind Contributions	over \$50 (or listed above)	0
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	0
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	0

^{*} 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.

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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
8/11/2006	Steven A. Pinto	55 Columbus Ave	Campaign Loan - open bank account	50
8/23/2013	Steven A. Pinto	55 Columbus Ave	Campaign Loan	800
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	850