



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2014 JAN 21 P 3:02

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

October 19, 2013

Ending Date:

December 31, 2013

FILE #

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

Norene C. Gachignard

Candidate Full Name (if applicable)

Councilor At-Large

Office Sought and District

16 Buchanan Road, Salem, MA 01970

Residential Address

Telephone Number (optional):

(987) 594-5207

Gachignard Committee

Committee Name

Darleen Melis

Name of Committee Treasurer

115 Federal Street, Salem, MA 01970

Committee Mailing Address

Telephone Number (optional):

(978) 744-6471

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

2,630

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

265

Line 3: Subtotal (line 1 plus line 2)

2,895

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

2,374.92

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

520.08

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

52.44

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

0

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

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:

Darleen Melis

(Treasurer's signature)

Date: Jan 21, 2014

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:

Norene Gachignard

(Candidate's signature)

Date: Jan 21, 2014

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)
Oct 28, 2013	Committee to Elect Kim Driscoll, 16 Glen Avenue, Salem, MA 01970	100	
Line 9: Total Receipts over \$50 (or listed above)		100	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)		165	
Line 11: TOTAL RECEIPTS IN THE PERIOD		265	

* 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**Oct 19, 2013 - Dec 31, 2013**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/27/13	Norene C. Gachignard	16 Buchanan Rd, Salem, MA	Retire Campaign Liabilities	\$ 1,525.92
11/5/13	Rockafella's	231 Essex St, Salem, MA 01970	Election Night Party	\$ 100.00
10/21/13	Christopher Sicuranza	7 Cedar Ave., Salem, MA	Social media consultation	\$ 300.00
11/2/13	Christopher Sicuranza	7 Cedar Ave., Salem, MA	Social media consultation	<u>\$ 299.00</u>
	Total Line 12:			\$2,224.92
		Line 12: Expenditures over \$50		\$2,224.92
		Line 13: Expenditures \$50 and under		<u>\$ 150.00</u>
		Line 14: Total Expenditures		\$2,374.92

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
Nov 1, 2013	Margaret Howard	80 Leach Street, Salem, MA	Postage	46
Nov 1, 2013	Margaret Howard	80 Leach Street, Salem, MA	Postage	6.44
		Line 15: In-Kind Contributions over \$50 (or listed above)		0
		Line 16: In-Kind Contributions \$50 & under (not listed above)		52.44
Enter on page 1, line 6 →		Line 17: TOTAL IN-KIND CONTRIBUTIONS		52.44

* 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			0
Enter on page 1, line 7 →				Line 18: TOTAL OUTSTANDING LIABILITIES (ALL) <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 2px;"></div>