

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 Please print or type all information, except signatures. Please print or type all information except signatures.	
Fill in dates: Reporting Period Beginning Jeh Date Year ZO13 Ending Reporting Period Beginning Jeh ZO13 Ending Reporting Period Beginning Jeh Reporting Period Beginning Period	
Type of report: (Check one) 28th day preceding preliminary	lution
Full Name of Candidate (if applicable) School Committee Office Sought and District 13 River St. Salem, MA Residential Address 5084519555 Tel. No. (optional) Committee to Elect Rick Johnson Committee Name Cynthia Johnson Name of Committee Treasurer 13 River St. Salem, MA Committee Mailing Address 5085271219 Tel. No. (optional)	~
SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used Summary BALANCE INFORMATION: \$ 5	
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 can finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represe 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: 7/9//3 Date	npaign nts the
FOR CANDIDATE FILINGS ONLY: (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 best of my knowledge and belief, a true and complete statement of all camp 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 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 camp finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represent 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: Date Candidate signature (in ink)	d any

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)		unt	Occupation & Employer (for contributions of \$200 or more)	
NA	NA	NA			
			114		
				5	
Line 9:	Total receipts in excess of \$50 (or listed above)		\dashv		
	Total receipts \$50 and under* (not listed above)				
	TOTAL 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.

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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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Am	oun
8/21		POBOX 38205 Houston, TX 102 Wharf St Salem MA	Signs	187	1
3/27	Esigns-com Scarled better Press	102 Wharfst Salem MA	Signs Brownes	187	7
	49				
		Line 12:	Expenditures over \$50	352	86
		Line 13:	Expenditures \$50 and under*	_	_
Er	nter on page 1, line 4	Line 14	:TOTAL EXPENDITURES	352	86

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not Page 3 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	NA	NA	NA	

		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.

NA	1/1		
, •	NA	NA	
Rick Johnson	13 Rivorst	Lowe	352,86
	p.		
ter on page 1, line 7	Line 18: OUTSTANDII	NG LIABILITIES (ALL)	1
	Rick Johnson ter on page 1, line 7		

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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