

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts 7014 JAN 21 A 8: 44	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates:  Beginning Date:  FILE #	19, 2013 Ending Date: Dec 31, 2013
Type of Report: (Check one)	
☐ 8th day preceding preliminary ☐ 8th day preceding election	☐ 30 day after election ⊠ year-end report ☐ dissolution
Robert K McCarthy	Committee to Elect Robert K McCarthy
Candidate Full Name (if applicable)	Committee Name
Ward 1 Councillor	Aidan P Bunting
Office Sought and District	Name of Committee Treasurer
153 Bay View Ave, Salem MA 01970	96 Bay View Ave, Salem MA 01970
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	4,862.29
Line 2: Total receipts this period (page 3, line 11)	375
Line 3: Subtotal (line 1 plus line 2)	5,237.29
Line 4: Total expenditures this period (page 5, lin	ne 14) 4,453.32
Line 5: Ending Balance (line 3 minus line 4)	783.97
Line 6: Total in-kind contributions this period (pa	age 6) 42
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: Eastern	
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo  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 activity, of all persons acting under the authority or on behalf of this committee in activity.	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature) Date: Jan 19, 2014
incurred any liabilities nor made any expenditures on my behalf during this reporting  Candidate without Committee OR Candidate with independent activity filing sel  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this signed under the penalties of perjury:	parate report best of my knowledge and belief, a true and complete statement of all campaign, in-kind contributions and liabilities for this reporting period and represents the

#### 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	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	(101 CONTIDUCIONS 01 \$200 OF MOTE)
Oct 29, 2013	James E Smith, 50 Congress Street, Ste 500, Boston, MA 02109	100	
Oct 29, 2013	Annie Clay Harris, 28 Chestnut St, Salem, MA 01970	75	
Nov 25, 2013	Stephen P Lovely or Jenna S Lovely, 14 Story St, Salem, MA 01970	100	
ine 9: Total Rece	ipts over \$50 (or listed above)	275	
ine 10: Total Rece	eipts \$50 and under* (not listed above)	100	
ine 11: TOTAL I	RECEIPTS IN THE PERIOD	375	← Enter on page 1, line 2

<sup>\*</sup> 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)		
Line 9: Total Recei	pts over \$50 (or listed above)				
Line 10: Total Rece	ipts \$50 and under* (not listed above)				
Line 11: TOTAL F	RECEIPTS IN THE PERIOD		Enter on page 1, line 2		

<sup>\*</sup> 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.)				
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Oct 22, 2013	Thriftco Printing	26 Howley St, Peabody, MA 01960	Printing	878.47
Oct 24, 2013	Thriftco Printing	26 Howley St, Peabody, MA 01960	Printing	185.41
Oct 25, 2013	Thriftco Printing	26 Howley St, Peabody, MA 01960	Printing	614.32
Nov 1, 2013	Thriftco Printing	26 Howley St, Peabody, MA 01960	Printing	1,430.79
Oct 24, 2013	Corbett & Lalli	PO Box 752 Middleton, MA 01949	Campaign Consultant	500
Oct 25, 2013	Postmaster	Salem Post Office, 01970	Postage	66
Nov 5, 2013	Christina's Pizza, Salem	239 Lafayette St, Salem 01970	Meals	95.
Nov 19, 2013	Lucy Corchado	c/o 153 Bay View Ave, Salem, 01970	Meals	64.42
Nov 27, 2013	Lucy Corchado	c/o 153 Bay View Ave, Salem, 01970	Meals	160
Dec 4, 2013	Robert McCarthy	153 Bay View Ave, Salem, 01970	Sundry expenses	306.78
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	4,301.19
		Line 13: Total Expenditures \$50	0 and under* (not listed above)	152.13
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	4,453.32

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 4

## SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date I alu	(mpmooreal nome)			
			9	
	L	ine 12: Expenditures over \$50	(or listed above)	
	L	ine 13: Expenditures \$50 and	under* (not listed above)	
	-	ine 14: TOTAL EXPENDIT		

<sup>\*</sup> 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
		2.4		
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	42
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			42	

\* 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
	9			
				[
	9			
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				