

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

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Commonwealth of Massachusetts	
File with: City or Town Clerk or Election Commission	2012 JAN 12 P 3: 52
Please print or type all	I information, except signatures.
Fill in dates: Month Date	Year CITY COLERK, SALEM, MASSYEN
	2611 Ending DEC. 31 201/
Type of report: (Check one) □8th day preceding preliminary □8th day preceding ele	action [120 days 2 and 4] 57
	ection □ 30 day after election Ø year-end report □ dissolution
DOUGLAS PHILIP SABIN	
Full Name of Candidate (if applicable) COUNCILLOR WARD 2	Committee Name
Office Sought and District	
34 NORTHEY ST, SALEM MA	Name of Committee Treasurer
Residential Address	Committee Mailing Address
978 745 2508	
Tel. No. (optional)	978 745 2508 Tel. No. (optional)
CVI NA A STATE OF THE STATE OF	The second secon
	ANCE INFORMATION:
Line 1: Ending balance from pr	evious report \$ 600.75
Line 2: Total receipts this perio	d (page 2, line 11) \$
Line 3: Subtotal (line 1 plus line 2)	\$ 600.75
Line 4: Total expenditures this	period (page 3, line 14) \$
Line 5: Ending balance (line 3 minu	
AND THAN NAME AND THAT AND	
Line 6: Total in-kind contributions	
Line 7: Total (all) outstanding liab	
Line 8: Name of bank(s) used	PALEM FIVE
Affidavit of Committee Treasurer:	
and the state of t	s, to the best of my knowledge and belief, a true and complete statement of all campaign ursements, in-kind contributions and liabilities for this reporting period and represents the
an persons acting under the additionty or on henait	of this committee in accordance with the requirements of M G 1 c 35
organic under the p	enalties of perjury:
Treasurer's signature (in ink)	Date
EOD CANDIDATE EILINGS	
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 certify that I have examined this report including attached schedules and it is.	to the best of my knowledge and heliaf a true and commutate with the true
finance activity, of all persons acting under the authority or on behalf of this contributions, incurred any liabilities nor made any expenditures on my behalf	Offinities in accordance with the construction of M (3.1 58.)
Candidate without Committee OR Candidate with independent activity	y filing tengrate report
I certify in. I have examined this report including attached schedules and it is.	to the best of my knowledge and belief a true and asset as a con-
campaign finance activity of all persons acting under the authority or on behalf	ements, in-kind contributions and liabilities for this reporting period and represents the of this committee in accordance with the requirements of M.G.L. c. 55.
Louglas Philip Sabin Candidate signature (in ink)	es of perjury:
Condition of the Carlos Carlos Sabin	January 12, 2012
community against the (IV IUK)	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	
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			and the second s		
Promise Annual Property Control		w blom and any property of the			
Line 9: Total	receipts in excess of \$50 (or listed above)	-	-		
Line 10: Total	receipts \$50 and under* (not listed above)		_		
Line 11: TOT	AL RECEIPTS IN THE PERIOD	0	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.

Page 2

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	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
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Market in the second se					

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		erelder, van voorzeerste, als de de voorze, viere, vriede dakkin konstruit spekreuw. De vroede bedeundskrie annaar van			
				District demonstrating and district.	
	Line 12: Expenditures over \$50 Line 13: Expenditures \$50 and under*		Expenditures over \$50		
			Expenditures \$50 and under*		
Ent	ter on page 1, line 4	Line 1	1: TOTAL EXPENDITURES	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 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
			To the state of th	er by market and market a secondary of
aggan ang an ang ang ang ang ang ang ang				
				of the state of th
		Line 15:	In-kind over \$50	•
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	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.

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
5-9-03	Douglas P. Sabih	34 NORTHEY ST. SALEH, MA 01970	LOAN BY CANDIDATE TO HIS CAMPAIGN	1,005.∞
9-8-03	DOUGLAS P. SABIN	34 NORTHEY ST SALBM, MA 01970	LOAN BY CANDIDATE TO HIS CAMPAIGN	870.00
9-15-63	Douglas P. SABIN	34 NORTHEY ST. SALRH, MA 01970	LOAN BY CANDIDATE TO HIS CAMPAIGN	800.00
10-18-04	DOUGLAS P. SABIN	34 NORTHEY ST. SALEM, MA 01976	LOAN BY CANDIDATE TO HIS CAMPAIGN	25.00
1-4-07	DOUGLAS P. SABIN	34 NORTHEY ST. SALEM, MA 01970	TO HIS CAMPAIGN.	30.00
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	2730.00