

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Prassacitusetts	File with City or Town Clork or Florida Co.
Fill in Reporting Period dates: Beginning Date: Ja	File with City or Town Clerk or Election Commission 1, 2012 Ending Date: Dec 31, 2012
Type of Report: (Check one)	CITY CLERK, SALEM, MASS.
8th day preceding preliminary 8th day preceding election	
STANLEY USOVITZ JR	COMM TO ELECT STANLEY J. USOVICZ JR
Candidate Full Name (if applicable)	Committee Name
MAYOR/SALEM	WILLIAM P. GOREHAM
Office Sought and District	Name of Committee Treasurer
2 BOTTS CT, SALEM, MA 01970	ONE SALEM GREEN, SUITE 410, SALEM, MA 01970
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
	Telephone Number (optional).
SUMMARY BALAN	NCE INFORMATION:
Line 1: Ending Balance from previous report	
Ending Balance from previous report	3,835.17
Line 2: Total receipts this period (page 3, line 1	1) 0
Line 3: Subtotal (line 1 plus line 2)	3,835.17
Line 4: Total expenditures this period (page 5, 1	line 14) 1,091.61
Line 5: Ending Balance (line 3 minus line 4)	2,743.56
Line 6: Total in-kind contributions this period (p	page 6) 0
Line 7: Total (all) outstanding liabilities (page 7	7) 0
Line 8: Name of bank(s) used: SALEM FIVE	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-king finance activity of all persons acting under the authority or on behalf of this committee it signed under the penalties of perjury:	in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 1/24/13
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 a incurred any liabilities nor made any expenditures on my behalf during this reportire.	he best of my knowledge and belief, a true and complete statement of all campaign finance
Candidate without Committee OR Candidate with independent activity filing so I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	separate report he best of my knowledge and belief, a true and complete statement of all campaign
Signed under the penalties of perjury:	(Candidate's signature) Date: // > 1/ > 1/ / 2

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)
ine 9: Total Receip	ts over \$50 (or listed above)	0	
	ots \$50 and under* (not listed above)	0	
Line 11: TOTAL RI	ECEIPTS IN THE PERIOD	0	← Enter on page 1, line 2
If you have itemized r	eceipts of \$50 and under, include them in line	D. Line 10 should	d include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received Name and Residential Address (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)		
Line 9: Total Recei	pts over \$50 (or listed above)	0			
Line 10: Total Recei	ipts \$50 and under* (not listed above)	0			
	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2		
* If you have itemized	* 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.)

report all expen		nittee name and a page number or	each page.)	
	To Whom Paid		D	A 4
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Jan 23, 2012	HAMILTON HALL	SALEM MA 01970	FUND RAISER EXPENSES	188.87
Feb 1, 2012	BEVERLY POLICE	BEVERLY MA 01915	DONATION	60
Feb 27, 2012	PETER TORIGIAN SCHOLARSHIP FUND	PEABODY MA 01960	DONATION	70
Feb 29, 2012	РЕМ	SALEM MA 01970	DONATION	95
May 21, 2012	NEARC	DANVERS MA 01923	DONATION	125
Jun 5, 2012	WAVE SCHOLARSHIP FUND	BOSTON MA	DONATION	125
Jun 5, 2012	PLUMMER HOME FOR BOYS	SALEM MA 01970	DONATION	150
Jun 15, 2012	SLATTERY FOR SENATE	SALEM MA 01970	CONTRIBUTION	200
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	1,013.87
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	77.74
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	1,091.61
* If you have iter	nized expenditures of \$50 and under	r, include them in line 12. Line 13 s	hould include only those expenditures	s 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. Page 4

SCHEDULE B: EXPENDITURES (continued)

D. 4. D. ! I	To Whom Paid	Address	Purpose of Expenditure	Amount
Date Paid	(alphabetical listing)	Address	Turpose of Expenditure	Amount
				77.77
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and t	under* (not listed above)	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD If you have itemized expenditures of \$50 and under include them in line 12. Line 13 should include only these 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)		
	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			

^{*} 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
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	0

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