

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: Jan	File with: City or Town Clerk or Election Commissio
Type of Report: (Check one)	(All year)
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Marble L Mainini III Candidate Full Name (if applicable)	
Planning Bd.	Committee Name
S Bandy (n	Name of Committee Treasurer
Residential Address E-mail:	Committee Mailing Address E-mail:
Phone # (optional):	Phone # (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, line	e 14)
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period (page	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	Ŏ
Line 8: Name of bank(s) used:	
Affidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best cativity, including all contributions, loans, receipts, expenditures, disbursements, in-kind committee activity of all persons acting under the authority or on behalf of this committee in activity or on behalf of this committee.	coordance with the requirements of M.G.L. c. 55.
OR CANDIDATE FILINGS ONLY	(Treasurer's signature) Date:
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the b activity, of all persons acting under the authority or on behalf of this committee in accommodate any liabilities nor made any expenditures on my behalf during this reporting p	pest of my knowledge and belief, a true and complete statement of all campaign finance
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the b finance activity, including contributions, loans, receipts, expenditures, disbursements, i campaign finance activity of all persons acting under the authority or on behalf of this cigned under the penalties of perjury:	est of my knowledge and belief, a true and complete statement of all campaign

SCHEDULE A: RECEIPTS (continued)

Name and Residential Address Date Received (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
		3250 57 200 57
ne 9: Total Receipts over \$50 (or listed above)		
ne 10: Total Receipts \$50 and under* (not listed above)		
ne 11: 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.

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		Line 12: Expenditures over \$	550 (or listed above)	
		Line 13: Expenditures \$50 and under* (not listed above)		
	Enter on page 1, line 4 →			

^{*} 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 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
	-			
		Line 18: TOTAL OUTSTAND		