

Form CPF M 102: Campaign Finance Reports Municipal Form Comparing and Political Finance No. 2007 of Campaign and Political Finance

of Massachusetts	S
Fill in Reporting Period dates: Beginning Date:	File with City or Town Clerk and lection Gammiss
Type of Report: (Check one)	0 [
	∞ 2
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
IBAYMOND PAGUCCI	
Candidate Full Name (if applicable)	Constable.
	Committee Name
Office Sought and District	
4 Woodning Road But	Name of Committee Treasurer
Residential Address	
Telephone Number (optional): 508-472-9013	Committee Mailing Address
1 SUS 413-4013	Telephone Number (optional):
SUMMARY BALANCI	E INEODMATION
	EINFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	M
Line 3: Subtotal (line 1 plus line 2)	8
Line 4: Total expenditures this period (page 5, line	14)
Line 5: Ending Balance (line 3 minus line 4)	\mathcal{C}
Line 6: Total in-kind contributions this period (page	e 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	
idavit of Committee Treasurer:	
retrify that I have examined this report including attached schedules and it is, to the best of a vity, including all contributions, loans, receipts, expenditures, disbursements, in-kind continues activity of all persons acting under the acti	ordance with the requirements of M.G.L. c. 55.
R CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box on	(Treasurer's signature) Date:
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 activity, of all persons acting under the authority or on behalf of this committee in according incurred any liabilities nor made any expenditures on my behalf during this reporting period and include without Committee OR Condidate without Committee OR Condidate.	t of my knowledge and belief, a true and complete statement of all campaign finance ance with the requirements of M.G.L. c. 55. I have not received any contributions, ind.
finance activity, including contributions, loans, receipts, expenditures, disbursements, in-k campaign finance activity of all persons acting under the authority or on behalf of this con	of my knowledge and belief, a true and complete statement of all
ed under the penalties of perjury:	(Candidate's signature) Date: 32519
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SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
			a to 2200 of more)
9: Total Receipts	over \$50 (or listed above)		
: 10: Total Receipts	s \$50 and under* (not listed above)		
11. TOTAL DEC	CEIPTS IN THE PERIOD	A	

^{*} 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	Amoun
		Line 12: Expenditures over \$50 (c	or listed above)	
		Line 13: Expenditures \$50 and und	der* (not listed above)	
N.	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITUE	RES IN THE PERIOD	M

^{*} 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
	-			
The state of the s				
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	PING LIABILITIES (ALL)	