



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

*****PRE*****

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning Month Day Year Ending Month Day Year
MAY 19 2012 APRIL 30 2013

Type of report: (Check one)

☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

DAVID W. SOPER

Full Name of Candidate (if applicable)

SELECTMAN

Office Sought and District

176 HIGH ST. HANSON, MA 02341

Residential Address

1-781-294-4466

Tel. No. (optional)

COMMITTEE TO ELECT DAVID SOPER

Committee Name

ROBERT LUNDSELL

Name of Committee Treasurer

176 HIGH ST. HANSON, MA 02341

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 438⁹¹
Line 2: Total receipts this period (page 2, line 11) \$ 2325⁰⁰
Line 3: Subtotal (line 1 plus line 2) \$ 2763⁹¹
Line 4: Total expenditures this period (page 3, line 14) \$ 940²⁰
Line 5: Ending balance (line 3 minus line 4) \$ 1823⁷¹
Line 6: Total in-kind contributions this period (page 4) \$ 48³⁷
Line 7: Total (all) outstanding liabilities (page 4) \$ -0-
Line 8: Name of bank(s) used ROCKLAND TRUST

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

5/9/13

Date

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

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

5/9/2013

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) | Amount | Occupation & Employer (for contributions of \$200 or more) |
|--|---|--------|---|
| 3/19/13 | BARBARA ARENA 131 WHITMAN ST. HANSON MA | 250 00 | VP of GRANTE STATE CORP. ^{Development} |
| 4/1/13 | TOM BERRY 211 OLD FARM RD, MILTON MA 02186 | 100 00 | |
| 2/28/13 | KEVIN BLACK 247 STATE ST. HANSON MA | 100 00 | |
| 4/16/13 | TOM CONSTANTINE 510 BROOK ST. HANSON, MA. | 50 00 | |
| 4/9/13 | DAN CROCE 304 MAIN ST. HANSON, MA. | 50 00 | |
| 4/1/13 | CHRIS FAVA PLYMOUTH 200 WATERCOURSE PLACE 02360 MA. | 25 00 | |
| 4/1/13 | PETER FORMAN 02360 51 WARREN AVE. PLYMOUTH MA | 50 00 | |
| 3/27/13 | BILL HARRIS 02332 148 BAYRIDGE LANE DUXBURY, MA | 100 00 | |
| 4/1/13 | GERALD LOZEAU 509 W. WASHINGTON ST. HANSON, MA | 100 00 | |
| 3/9/13 | BOB LUNDELL 93 HIGH ST. HANSON, MA. | 150 00 | |
| 3/9/13 | WENDY LUNDELL 93 HIGH ST. HANSON, MA | 150 00 | |
| 4/23/13 | MA REPUBLICAN MUNI PAC - CPP FOR 43 SHIRLEY RD. SHREWSBURY, MA 01545 80775 | 500 00 | |
| 3/24/13 | NORM MCLELLAN 223 HIGH ST. HANSON, MA | 100 00 | |
| 4/3/13 | STEVE O'GARA 44 LORING AVE WHITMAN MA 02382 | 25 00 | |
| 4/27/13 | JOE PELLIGRA 72 LAKESIDE TERRACE HANSON MA | 50 00 | |
| Line 9: Total receipts in excess of \$50 (or listed above) | | | |
| Line 10: Total receipts \$50 and under* (not listed above) | | | |
| Line 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 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) | Amount | Occupation & Employer (for contributions of \$200 or more) |
|--|---|---------|---|
| 4/2/13 | BILL AND LOUISE SCOTT 328 INDIAN HEAD ST. HANLON, MA | 50 00 | |
| 4/1/13 | DEAN WEBER 19 JEAN ST. HANSON, MA | 50 00 | |
| 3/29/13 | DAN WEBSTER 499 STATE ST. HANSON, MA | 250 00 | LAWYER AT WEBSTER & WEBSTER |
| 4/8/13 | BRAD WYATT 38 GLAZIER ST. BOLYSTON, MA 01505 | 100 00 | |
| 4/6/13 | BRUCE YOUNG 594 INDIAN HEAD ST. HANSON, MA | 75 00 | |
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| Line 9: Total receipts in excess of \$50 (or listed above) | | | |
| Line 10: Total receipts \$50 and under* (not listed above) | | | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | 2325 00 | 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

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 | |
|-----------|--|---|---------------------------------------|--------|----|
| 3/19/13 | USPS HANSON MPO | 270 MAIN ST. HANSON MA | POSTAGE | 32 | 20 |
| 4/6/13 | MORTEVA THERAVIAN | 610 WASHINGTON ST. BRAINTREE, MA 02184 | MAILER | 310 | 00 |
| 4/20/13 | USPS HANSON MPO | 270 MAIN ST. HANSON, MA | POSTAGE | 598 | 00 |
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| | | | Line 12: Expenditures over \$50 | | |
| | | | Line 13: Expenditures \$50 and under* | | |
| | | | Line 14: TOTAL EXPENDITURES | 940 | 20 |

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 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 |
|-------------------------|---------------------|---------------------|---------------------------------|--------------|
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| | | | | |
| Enter on page 1, line 6 | | | Line 15: In-kind over \$50 | |
| | | | Line 16: In-kind \$50 and under | |
| | | | Line 17: Total In-kind | 48.37 |

* 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 |
|-------------------------|-------------|---------|---|--------|
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| Enter on page 1, line 7 | | | Line 18: OUTSTANDING LIABILITIES (ALL) | |