

Form CPF M 102: Campaign Finance Report

	Municipal Form Office of Campaign and Political Finance		2010	TO:			
Congress wealth of Measurhessetts							OWN (
File with: City or Town Clerk or Election Commission							71/17
Ple	ase print or ty	pe all information	n, except sig	natures.		\triangleright	<u>≯</u> M
Fill in dates: Reporting Period Beginning MAY	16	Y 2009	Ending	Month APRIL	.28	20m0	HANSON
Type of report: (Check one) ☐8th day preceding preliminary ☐8th	th day precedir	ng election 🗆	30 day after o	election 🗆	year-end re	port □di:	solution
DAVID W. SODE SFull Name of Candidate (if app Select MAN	plicable)		ommit izabel	ee ke Committee N	Flec I NOVE	F DAY SOPE	
Office Sought and Distriction Residential Address HANSON, MA	781-294	1- H	76 H	of Committee GAS mittee Mailin M	+		

SUMMARY BALANCE INFORMATION:				
Line 1: Ending balance from previous report	s 0			
Line 2: Total receipts this period (page 2, line 11)	s 2045.00			
Line 3: Subtotal (line 1 plus line 2)	\$ 2045.00			
Line 4: Total expenditures this period (page 3, line 14)	\$ 633.37			
Line 5: Ending balance (line 3 minus line 4)	\$ 1411.63			
Line 6: Total in-kind contributions this period (page 4)	\$ 80.00			
Line 7: Total (all) outstanding liabilities (page 4)	S 0			
Line 8: Name of bank(s) used Rockland Trust				

Tel. No. (optional)

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:

7-7-10

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Willester or Camericans: (cueck 1 dox outly)	
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 finance activity, of all persons acting under the authority or on behalf of this commit contributions, incurred any liabilities nor made any expenditures on my behalf during Candidate without Committee OR Candidate with independent activity filling I certify that I have examined this report including attached schedules and it is, to the	tee in accordance with the requirements of M.G.L. c. 55. I have not received any this reporting period. separate report best of my knowledge and belief, a true and complete statement of all campaign.
finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this Signed under the penalties of penalties of	committee in accordance with the requirements of M.G.L. c. 55.
Candidate signature (in ink)	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.

	number on each page.					
Date Name and Residential Address		Amount		Occupation & Employer		
Received	(alphabetical listing required)			(for contributions of \$200 or more)		
	Roberte moeth	150				
4/14/10	Tom Constantine 510 Brook St, Hanson, MA 02341		00	retired		
3/10/10	wolfgang Falcone. 80 HancockoAve, Brackton, MA 02301	100	00	retired		
4/14/10	Richard Flynn 91 Beckett Street, Hanson, MA 02341	100	00			
4/14/10	Christine Fagarty 34.B Atlantic Ave, Cohasset, MA 02025	100	∞			
3/06/10	Robert Lundell 93 High Street, Hanson, MA 02341	150	00			
3/27/10	Cynthia Macana Do					
3127/10	Cynthia Doggett 24 Wheeler Rd, Lincoln, MA 01773	250	∞	homemaker		
3/27/10	Stuart MacDonald 24 wheeler Rd, Lincoln, MA 01773	500	00	CEO - MacGray Services		
4/14/10	Norman MacLellan 223 High St, Hanson, MA 02341	100	00			
4/14/10	Laurance McCann 700 High St, Hanson, MA 02341	75	00			
4/19/10	Republican Town Committee	150	00			
4/16/10	Bruce Young 594 Indian Head St, Hanson, MA 02341	200	∞	retired		
Line 9:	Total receipts in excess of \$50 (or listed above)	1825	00			
Line 10: Total receipts \$50 and under* (not listed above)		220	∞			
Line 11: TOTAL RECEIPTS IN THE PERIOD			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.

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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

umber on eac Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amo	unt
4105/10	- anzon-com		Harkyou cards	- 36	
4/24/10	Fiore Silkscreening & Sign	83 E. Water Street Rockland, MA	campaign yard signs	580	00
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-	•				
		·			
!					
		Line 12:	Expenditures over \$50	580	00
			Expenditures \$50 and under*	<u>53</u>	37
	Enter on page 1, line 4	Line 14	:TOTAL EXPENDITURES	633	5 7

^{*}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	
4109/10	Richard Flynn	91 Beckett Street Hanson, MA 02341	printing	\$80.00	
	<u> </u>	Line 15:	In-kind over \$50	\$70.00	
		Line 16:	In-kind \$50 and under	0	
• •	Enter on page 1, line 6	Line 17:	Total In-kind	\$80.00	

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

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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