

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts File with: City or Town (Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 10/19/13 Ending Date:	31/13
Type of Report: (Check one)	> = = = = = = = = = = = = = = = = = = =
8th day preceding preliminary 8th day preceding election 30 day after election year-end repor	rt dissolution
MR. JOHN RIE COMMITTE TO ELE	Er Din My CE
Candidate Full Name (if applicable) Committee Name	•
WAND 5- DUDFN JA PAVL MY, CW	LEA
Office Sought and District Name of Committee Treasur	
9 STUTTON ST WEWIN 32 BUFWAR	ND 0248
Residential Address Committee Mailing Address	s
Telephone Number (optional): Telephone Number (optional):	27-0585
SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report 44/6-07	
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 14)	
Line 5: Ending Balance (line 3 minus line 4) \$ 4/6.07	
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: VILLP67 BDN, C	
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 statemen activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and repfinance activity of all persons acting under the authority of on behalt of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: (Treasurer's signature) Candidate with 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 states.	e: 1/2/1/2
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 incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without 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 state finance activity, including contributions, loans, receipts expenditures, disbursements, in-kind contributions and liabilities for this reporting period.	ement of all campaign
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. Signed under the penalties of perjury: (Candidate's signature)	. / / / /

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)
		·	
	pts over \$50 (or listed above)		
ne 10: Total Rece	ipts \$50 and under* (not listed above)		
ne 11: TOTAL F	RECEIPTS IN THE PERIOD		←□ Enter on page 1, line 2

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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date I alu	(alphabetical listing)	Address	1 ur pose of Expenditure	Amount
		Line 12: Total Expenditures ov	rer \$50 (or listed above)	
		Line 13: Total Expenditures \$50 and under* (not listed above)		
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	

^{*} 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 3

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
* 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. Line 15: In-Kind Contributions over \$50 (or listed above) Line 16: In-Kind Contributions \$50 & under (not listed above)		over \$50 (or listed above)		
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	

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.

during this reporting period.				
Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line $7 \rightarrow$ Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				