



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED AND FILED

JAN 13 2012 20

At 1 o'clock 05 minutes P.M.

File with: Richard Alcombright City Clerk

Fill in Reporting Period dates: Beginning Date: Ending Date:

Type of Report: (Check one)
 8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

Candidate Full Name (if applicable)

Office Sought and District

Residential Address

Telephone Number (optional):

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

| | |
|--|--|
| Line 1: Ending Balance from previous report | <input type="text" value="5,711.65"/> |
| Line 2: Total receipts this period (page 3, line 11) | <input type="text" value="720"/> |
| Line 3: Subtotal (line 1 plus line 2) | <input type="text" value="6,431.65"/> |
| Line 4: Total expenditures this period (page 5, line 14) | <input type="text" value="4,645.69"/> |
| Line 5: Ending Balance (line 3 minus line 4) | <input type="text" value="1,785.96"/> |
| Line 6: Total in-kind contributions this period (page 6) | <input type="text" value="0"/> |
| Line 7: Total (all) outstanding liabilities (page 7) | <input type="text" value="0"/> |
| Line 8: Name of bank(s) used: | <input type="text" value="Adams Co-Operative Bank"/> |

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: Joanne DeRose (Treasurer's signature) Date:

FOR CANDIDATE FILINGS ONLY: 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: [Signature] (Candidate's signature) 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.

(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) |
|--|---|------------|---|
| Nov 1, 2011 | Donald Alcombright 61 Boot Pond Road Plymouth, MA 02360 | 200 | Retired Teacher |
| Nov 2, 2011 | Gabriella Bond P.O. Box 776 North Adams, MA 01247 | 100 | |
| Nov 2, 2011 | Noella Carlow 26 Crandall Street Adams, MA 01220 | 50 | |
| Nov 5, 2011 | Johnathon Grinnell P.O. Box 713 Williamstown, MA 01267 | 100 | |
| Nov 3, 2011 | Peter Larkin 496 Cross Street Boylston, MA 01505 | 100 | |
| Dec 21, 2011 | Quadland's Flowers & Gifts 90 Holden Street North Adams, MA 01247 | 50 | |
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| Line 9: Total Receipts over \$50 (or listed above) | | 600 | |
| Line 10: Total Receipts \$50 and under* (not listed above) | | 120 | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | 720 | ← 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 (continued)

| Date Received | Name and Residential Address (alphabetical listing required) | Amount | Occupation & Employer (for contributions of \$200 or more) |
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| Line 9: Total Receipts over \$50 (or listed above) | | | ← Enter on page 1, line 2 |
| Line 10: Total Receipts \$50 and under* (not listed above) | | | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | | |

* 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.

(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 |
|--|--|---|----------------------------|----------|
| Nov 8, 2011 | Anthony Abusi | 55 Johnson Street North Adams, MA 01247 | Campaign HQ Supplies | 68.41 |
| Dec 5, 2011 | Axiom Design Group | 3741 S. Vermont Avenue St. Francis, WI 53235 | Website Services | 259.9 |
| Nov 8, 2011 | Bona Marketing | 59 Main Street North Adams, MA 01247 | Election Mailer | 965 |
| Nov 28, 2011 | Boston Seafood Restaurants | American Legion Drive North Adams, MA 01247 | After-Election Celebration | 1,059.3 |
| Dec 3, 2011 | Drury Girls Basketball | 1130 South Church Street North Adams, MA 01247 | Sponsorship | 75 |
| Nov 8, 2011 | Keith Bona | 179 North Street North Adams, MA 01247 | Postage | 703.18 |
| Dec 3, 2011 | Richard Alcombright | 40 Williams Street North Adams, MA 01247 | Robocalls | 206.78 |
| Nov 1, 2011 | Vox Radio Group | State Street North Adams, MA 01247 | Radio Ads | 1,225.62 |
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| Line 12: Total Expenditures over \$50 (or listed above) | | | | 4,563.19 |
| Line 13: Total Expenditures \$50 and under* (not listed above) | | | | 82.5 |
| Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD | | | | 4,645.69 |

* 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 B: EXPENDITURES (continued)

| Date Paid | To Whom Paid (alphabetical listing) | Address | Purpose of Expenditure | Amount |
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| Line 12: Expenditures over \$50 (or listed above) | | | | |
| Line 13: Expenditures \$50 and under* (not listed above) | | | | |
| Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES 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.

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 |
|--|---------------------|---------------------|-----------------------------|----------|
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| Line 15: In-Kind Contributions over \$50 (or listed above) | | | | 0 |
| Line 16: In-Kind Contributions \$50 & under (not listed above) | | | | 0 |
| Line 17: TOTAL IN-KIND CONTRIBUTIONS | | | | 0 |

* 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.

