

This report is due September 19, 2011 from all candidates if there is a Preliminary Election anywhere in the City.



Commonwealth of Massachusetts

FITCHBURG CITY CLERK
2011 SEP 19 P 2:03

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

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="\$ 1,450.00"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="\$ 1,450.00"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="\$ 1,277.00"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="\$ 173.00"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text" value="\$ 317.00"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text"/>
Line 8: Name of bank(s) used:	<input type="text" value="Fitchburg Municipal Credit Union"/>

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) 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: _____ (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)
6/20/2011	Prather, William 86 East Main St Ayer, MA 01432	\$ 75 ⁰⁰	
7/11/2011	Brown, Jonathan 221 Billings Rd Fitchburg, MA 01420	\$ 150 ⁰⁰	MASS State Police
6/20/2011	GARIBAY, NORIM 123 Pearl Hill Rd Fitchburg, MA 01420	\$ 50 ⁰⁰	
6/22/2011	MAZZAVELLA, Kim 35 N. Shore Rd Westminster, MA 01473	\$ 50 ⁰⁰	
6/20/2011	Mechan, James 20 Loiselle Ave Fitchburg, MA 01420	\$ 50 ⁰⁰	
6/20/2011	PANAGIOTIS, MARK 130 Ashburnham Hill Rd Fitchburg, MA 01420	\$ 75 ⁰⁰	
6/20/2011	Pellitieri, Maryanne 351 Walton St Fitchburg, MA 01420	\$ 50 ⁰⁰	
6/20/2011	Pittman, Shawn & Tina 1256 John + Fitchburg Fitchburg, MA 01420	\$ 50 ⁰⁰	
6/20/2011	Quinn, Jay 571 Marshall Rd Fitchburg, MA 01420	\$ 75 ⁰⁰	
6/20/2011	Richard, Rosevorse 15 Lawton Ave Fitchburg, MA 01420	\$ 100 ⁰⁰	
7/1/2011	Solomato, Joseph 104 Rinnock Rd Fitchburg, MA 01420	\$ 50 ⁰⁰	
6/20/2011	THU, Forrest 45 Mechanic St Fitchburg, MA 01420	\$ 50 ⁰⁰	
Line 9: Total Receipts over \$50 (or listed above)		\$ 825 ⁰⁰	
Line 10: Total Receipts \$50 and under* (not listed above)		\$ 345 ⁰⁰	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$ 1170 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8-20-2011	Leroy Clark Fisher Rd Fitchburg MA. 01520	\$100 -	
8-25-2011	John Kim 39 Pleasant St. Northburg MA 01524	\$100 -	
8-25-2011	Wu Kim 39 Pleasant St Northburg MA	\$80 -	

Line 9: Total Receipts over \$50 (or listed above)	\$280 ⁰⁰
Line 10: Total Receipts \$50 and under* (not listed above)	-
Line 11: TOTAL RECEIPTS IN THE PERIOD	280 ⁰⁰

\$ 1170.⁰⁰
 \$ 280.⁰⁰
\$ 1450.⁰⁰

← 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.

(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
8-10-2011	NOR EAST DESIGNS	435 LANCASTER ST. LANCASTER MA 01468	SIGNS + BANNER DECALS.	\$670 ⁰⁰
8-25-2011	NOR EAST DESIGNS	435 LANCASTER ST LANCASTER, MA 01468	HOLDING SIGNS POST CARDS	\$370 ⁰⁰
8-10-2011	NOR EAST DESIGNS	435 LANCASTER ST LANCASTER, MA 01468	ADDITIONAL SIGNS	\$170 ⁰⁰
8-24-2011	U.S. POST OFFICE	MAIN ST FITCHBURG, MA 01420	STAMPS FOR UTILITY	\$8. ⁰⁰
9-10-2011	US POST OFFICE	MAIN ST FITCHBURG, MA 01420	STAMPS FOR POST CARDS	\$77. ⁰⁰
Line 12: Total Expenditures over \$50 (or listed above)				\$1277. ⁰⁰
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1277. ⁰⁰

* 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

	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.

JAN 1, 2011 - Sept 9, 2011

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
3/10/2011	Robert Campbell	96 Cedar St Fitchburg MA 01422	PAID out purchased Fitchburg Ward 5 phone #	\$150.00
6/23/2011	Robert Campbell	96 Cedar St. Fitchburg MA 01422	PAID INVITATION for Fundraiser.	117.14
6/25/2011	Singapore Rest Gift Certificate	Town City Mall Fitchburg MA 01422	Gift Certificate	\$50.00
Line 15: In-Kind Contributions over \$50 (or listed above)				\$317.00
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				\$317.00

* 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: TOTAL OUTSTANDING LIABILITIES (ALL)**