

## Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political FinancEITCHBURG CITY CLERK

Of Prassacitation	File With Sciry of Bwn CMrk 3. 1500 Commission					
Fill in Reporting Period dates: Beginning Date: Jan :	1, 2017 Ending Date: Sep 8, 2017					
Type of Report: (Check one)						
⊗ 8th day preceding preliminary	30 day after election year-end report dissolution					
Josiah Richards						
Candidate Full Name (if applicable) ward 5 city councilor	Committee Name					
Office Sought and District 199 Fisher Rd, Fitchburg, MA 01420	Name of Committee Treasurer					
Residential Address E-mail:	Committee Mailing Address  E-mail:					
Phone # (optional): (617) 306-3840	Phone # (optional):					
SUMMARY BALANCE INFORMATION:						
SUMIMARY BALANC	LE INFORMATION:					
Line 1: Ending Balance from previous report	0					
Line 2: Total receipts this period (page 3, line 11)	126.250					
Line 3: Subtotal (line 1 plus line 2)	126.250					
Line 4: Total expenditures this period (page 5, lin	ne 14) 126.25					
Line 5: Ending Balance (line 3 minus line 4)	Ø -126.25					
Line 6: Total in-kind contributions this period (pa	age 6) 0					
Line 7: Total (all) outstanding liabilities (page 7)	126.25					
Line 8: Name of bank(s) used: N/A						
Affidavit of Committee Treasurer:						
I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in	contributions and liabilities for this reporting period and represents the campaign					
Signed under the penalties of perjury:	(Treasurer's signature)  Date:					
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	ox only)					
	be best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, a period.					
Candidate without Committee OR Candidate with independent activity filing so  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of the	be best of my knowledge and belief, a true and complete statement of all campaign s, in-kind contributions and liabilities for this reporting period and represents the					
Signed under the penalties of perjury: Jonal W. Dela	(Candidate's signature)  Date: 9/18/17					

## **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.)

Data David	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
Aug 12, 2017	Josiah W Richards 199 Fisher Dr, Fitchburg, MA 01420	126,25 · <del>126.55</del>	Community health worker The Arc of Opportunity in North Central Massachusetts
Line 9: Total Receipts over \$50 (or listed above)		126.55	126.25
ine 10: Total Receipts \$50 and under* (not listed above)			25 (24)
Line 11: TOTAL RECEIPTS IN THE PERIOD 126.55			126.25 (pur) ← Enter on page 1, line 2

<sup>\*</sup> 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 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
Jun 17, 2017	Josiah Richards	199 Fisher Rd Fitchburg, MA 01420	www.VistaPrint.com business cards	26.55
Jul 25, 2017	Josiah Richards	199 Fisher Rd Fitchburg, MA 01420	www.VistaPrint.com door hangers	24.7
Aug 12, 2017	Josiah Richards	199 Fisher Rd Fitchburg, MA 01420	www.BuildaSign.com campaign sign bumper stickers	75
	,			
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	ine 18: TOTAL OUTSTANDING LIABILITIES (ALL)	