



Commonwealth of Massachusetts

Form CPEM 102: Campaign Finance Report Municipal Form

2013 OCT 28 AM 10:07 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

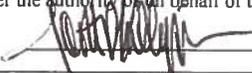
Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

| | |
|--|---|
| Line 1: Ending Balance from previous report | <input type="text" value="0"/> |
| Line 2: Total receipts this period (page 3, line 11) | <input type="text" value="4356.00"/> |
| Line 3: Subtotal (line 1 plus line 2) | <input type="text" value="4356.00"/> |
| Line 4: Total expenditures this period (page 5, line 14) | <input type="text" value="2798.75"/> |
| Line 5: Ending Balance (line 3 minus line 4) | <input type="text" value="1557.25"/> |
| 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="Rockland Trust"/> |

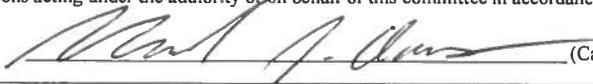
Affidavit of Committee Treasurer:
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind 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) |
|--|---|---------|---|
| 8/29/13 | Louise Kennedy 126 Lone Pine Rd North Waterboro ME 04061 | 400.00 | Retired Administrative Secretary |
| 8/29/13 | Mark Van Dine 7 Isaac Sprague Dr Hingham MA 02043 | 100.00 | |
| 9/19/13 | Linda Lee Cozzens 103 Hollis Ave Braintree MA 02184 | 100.00 | |
| 9/19/13 | Leland Dingee 211 Glenrose Ave Braintree MA 02184 | 75.00 | |
| 9/19/13 | Arthur L Martel Jr 1320 New Boston Rd Fall River MA 02720 | 200.00 | Business Manager/Toyota |
| 9/19/13 | Joan F McDonough 56 Columbus Ave Braintree MA 02184 | 100.00 | |
| 9/19/13 | Michael Modestino 32 Old Valley Way Braintree MA 02184 | 100.00 | |
| 9/19/13 | John Mullaney 89 Herbert Rd Braintree MA 02184 | 100.00 | |
| 9/19/13 | Lonzie Owens 126 Lone Pine Rd North Waterboro ME 04061 | 250.00 | Retired Computer Programmer |
| 9/19/13 | Ruth & Robert Pettengill 42 Spring St Braintree MA 02184 | 189.00 | |
| 9/19/13 | Deirdre Fleming Shea 124 Evergreen Ave Braintree MA 02184 | 100.00 | |
| 9/19/13 | Francis J Shea 124 Evergreen Ave Braintree MA 02184 | 200.00 | Political Consultant |
| Line 9: Total Receipts over \$50 (or listed above) | | 1914.00 | |
| Line 10: Total Receipts \$50 and under* (not listed above) | | | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | | ← 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) |
|--|---|---------|---|
| 9/19/13 | Charles & Cheryl Tufankjian 389 King Caesar Rd Duxbury MA 02332 | 200.00 | owns Tufankjian Toyota (car dealership) |
| 9/30/13 | Melissa Jane Morse 21 A St Gardner MA 01440 | 100.00 | |
| 9/30/13 | Robert & Wendy Wilfand 560 Jerusalem Rd Cohasset MA 02025 | 100.00 | |
| 10/11/2013 | Daniel McQuillan 656 Common St Walpole MA 02081 | 100.00 | |
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| Line 9: Total Receipts over \$50 (or listed above) | | 2414.00 | |
| Line 10: Total Receipts \$50 and under* (not listed above) | | 1942.00 | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | 4356.00 | ← 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 |
|--|--|--|-------------------------------------|----------------|
| 10/4/13 | BCAM TV | 128 TOWN ST. BRAintree MA 02184 | 3 Television Ads (Oct 4th -Nov 5th) | 105.00 |
| 10/2/13 | Braintree Advertiser | 28 River St Braintree MA 02184 | 1/2 Page Ad Oct. 9th edition | 230.00 |
| 9/17/13 | East Coast Printing | 449 Washington St Weymouth MA 02188 | Bumper Stickers | 239.00 |
| 10/9/13 | East Coast Printing | 449 Washington St Weymouth MA 02188 | Friend Cards/Voter Lists/Palm Cards | 829.38 |
| 10/17/13 | East Coast Printing | 449 Washington St Weymouth MA 02188 | Friend Cards | 100.96 |
| 9/20/13 | Fasano's Catering | 519 Pond St Braintree MA 02184 | Fundraising Hall/Catering | 577.00 |
| 8/28/13 | Printing Unlimited | 63 Plymouth St Holbrook MA 02343 | Introductory Letter Prints | 276.25 |
| 9/18/13 | Printing Unlimited | 63 Plymouth St Holbrook MA 02343 | Signs For Holding | 275.19 |
| | | | | |
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| | | | | |
| Line 12: Total Expenditures over \$50 (or listed above) | | | | 2632.78 |
| Line 13: Total Expenditures \$50 and under* (not listed above) | | | | 165.97 |
| Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD | | | | 2798.75 |

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.



The Town of Braintree
Office of the Town Clerk

Joseph F. Powers, CMC/CMMC

Town Clerk
Chairman, Board of License Commissioners

TEL: 781-794-8240
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