

## Form CPF M 102: Campaign Finance Report Municipal Form RECEIVED TOWN CLERK BRAINTREE, MA

Office of Campaign and Political Finance

2017 MAR -1 PM 12: 15

of Massachusetts	File with City or Town Clerk or Election Commission				
Fill in Reporting Period dates: Beginning Date: 12	2-31-15 Ending Date: 12-31-16				
Type of Report: (Check one)					
☐ 8th day preceding preliminary ☐ 8th day preceding election	30 day after election year-end report dissolution				
James P. Regan Candidate Full Name (if applicable) Town of Braintree Municipal Light Board	The Committee to Elect Jana P. Regan Robert P. Ronan				
35 Hobart Ave Braintee Maio 2(84) Residential Address	Name of Committee Treasurer  35 Hobat Ave Braintree Ma. 02184  Committee Mailing Address				
E-mail:	E-mail:				
Phone # (optional):	Phone # (optional):				
SUMMARY BALANC	E INFORMATION:				
Line 1: Ending Balance from previous report	339,40				
Line 2: Total receipts this period (page 3, line 11)					
Line 3: Subtotal (line 1 plus line 2)	339.40				
Line 4: Total expenditures this period (page 5, line	50.00				
Line 5: Ending Balance (line 3 minus line 4)	289.40				
Line 6: Total in-kind contributions this period (pag	ge 6)				
Line 7: Total (all) outstanding liabilities (page 7)	0				
Line 8: Name of bank(s) used: Braintree Coopertie Bank					
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, excenditures, disbursements, in-kind exfinance activity of all persons acting under the authority or on bolial of this committee in a Signed under the penalties of perjury:	of my knowledge and belief, a true and complete statement of all campaign finance continuous and liabilities for this reporting period and represents the campaign ecordance with the requirements of M G L c 55  (Treasurer's signature) Date: /-6-/7				
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box					
activity, of all persons acting under the authority or on behalf of this committee in accommend any liabilities nor made any expenditures on my behalf during this reporting particles.	period.				
Candidate without Committee OR Candidate with independent activity filing sep  1 certify that I have examined this report including attached schedules and it is, to the befinance activity, including contributions, loans receipts, expenditures, discursements, campaign finance activity of all persons acting under the authority or on bonal of this	best of my knowledge and belief, a true and complete statement of all campaign in-kind contributions and liabilities for this reporting period and represents the committee in accordance with the requirements of M.G.L. c. 55				
Signed under the penalties of perjury:	Candidate's signature) Date: /-//				

## **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.)

To Whom Paid				
Data Daid	1	Address	Down as af Fam and itams	A 4
Date Paid	(alphabetical listing)		Purpose of Expenditure	Amount
7/14/16	Braintice Boschall	17 Herbert Rd. Braintseella.	Hish Secol Fund Rassa	50,00
			2000	7.0
	E -			
				1
			2	
				2000
			5 TO	
		9.9		
			77 57	
				-321612
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				

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

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