

REVISED
12/3/2015 *fine*

Rec'd 3:40pm
10/26/2015



RECEIVED TOWN CLERK
BRAINTREE, MA

Form CPF M 102: Campaign Finance Report
Municipal Form
OFFICE OF CAMPAIGN AND POLITICAL FINANCE
BRAINTREE, MA

2015 DEC -3 AM 11:30

Office of Campaign and Political Finance

2015 OCT 27 AM 8:32

Commonwealth
of Massachusetts

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="298.05"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="\$1300.00"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="\$1,398.05"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="\$268.63"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="\$1329.42"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text" value="0.00"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text" value="\$4,372.44"/>
Line 8: Name of bank(s) used:	<input type="text" value="Quincy Credit Union"/>

Amend 12/3/15

Amend 12/2/15

817.05

1598.05

268.63

1329.42

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: *Colette Clifford* (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: *Paul Dan Clifford* (Candidate's signature) Date:



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2015 OCT 27 AM 8:32

File with: City or Town Clerk or Election Commission

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Type of Report: (Check one)
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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):

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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:

Received 3:40pm
10/26/2015
CITY TOWN CLERK
BRAintree, MA

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)
Caulfield, Tom	65 St. Claire St. Braintree MA. 02184	100.00	
Harrington, Edward	51 Bramlewood Lane, Braintree MA., 02184	100.00	
Marinelli, Frank	439 Washington St. Braintree, MA. 02184	150.00	
Quirk, Daniel	PO Box 850972	500.00	President Quirk Auto Dealers
Ridge, Gerald	138 Cain Ave. ,Braintree, MA. 02184	150.00	
Spadea, Anthony	639 Granite St., Braintree, MA. 02184	50.00	
Thompson, Peter	1599 Washington Street, Braintree, MA. 02184	200.00	
Wong, Kevin	43 South Street, Braintree, MA.02184	50.00	
Line 9: Total Receipts over \$50 (or listed above)		\$1200.	
Line 10: Total Receipts \$50 and under* (not listed above)		\$100.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$1300.00	← 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)

Line 9: Total Receipts over \$50 (or listed above) \$1200.00

Line 10: Total Receipts \$50 and under* (not listed above) \$100.00

Line 11: TOTAL RECEIPTS IN THE PERIOD \$1300.00

← 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
09/08/2015	Staples	Pearl Street, Braintree, MA. 02184	Printing ink	\$63.74
09/08/2015	Staples	Pearl Street, Braintree, MA. 02184	Envelops and Paper	\$54.89
08/11/2015	Vietnam Veterans Golf Memorial Tournament Scholarship	1752 Washington Street, Brintree, MA. 02184	Dontion to Vietnam Veteran Scholarship fund	150.00
Line 12: Total Expenditures over \$50 (or listed above)				\$268.63
Line 13: Total Expenditures \$50 and under* (not listed above)				\$0.00
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$268.63

Enter on page 1, line 4 →

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

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

Line 12: Expenditures over \$50 (or listed above)	\$268.63
Line 13: Expenditures \$50 and under* (not listed above)	\$0.00
Line 14: TOTAL EXPENDITURES IN THE PERIOD	\$268.63

Enter on page 1, line 4 →

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

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

NO "In-Kind Contributions"

Line 15: In-Kind Contributions over \$50 (or listed above)	\$0.00
Line 16: In-Kind Contributions \$50 & under (not listed above)	\$0.00
Line 17: TOTAL IN-KIND CONTRIBUTIONS	\$0.00

Enter on page 1, line 6 →

* 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 to the contribution information.

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
	Carried	FORWARD	From Dec. 31, 2014	

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)** \$4,372.44



Commonwealth of Massachusetts

Schedule E Municipal Form Disclosure of Assets Statement Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

CPF ID# _____

This form should be filed by all candidates and committees with each year end and each dissolution report.

Committee Name: Committee to Elect DAN CLIFFORD Date of report: 10-26-2015

All candidates and committees must fill in Part A or Part B.

Part A:

No assets* were acquired or disposed of by this candidate/committee during the period covered by this statement.

Part B:

Assets acquired: List all assets acquired since the committee last filed this statement. If this is the first Schedule E you have filed, list all assets.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value

Assets disposed of: List all assets sold, traded or transferred during the reporting period covered by this statement.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	Disposition Value Attach statement of how value is determined.

Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.

*An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.

Signed under the penalties of perjury:

Paul Dan Clifford 10-26-15
Candidate signature Date

Signed under the penalties of perjury:

Collette Clifford 10-26-15
Treasurer signature Date

Attach additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.

