

Form CPF M 102: Campaign Finance Report Municipal Form TOWN OF NORWELL.

Municipal Form Office of Campaign and Political Finance

2015 JUN 15 PM 12: 09

Please print or type all information, except signatures. Please print or type all information, except signatures. Please print or type all information, except signatures Please print or type all information, except signatures Please print or type all information, except signatures Please print or type all information Please print or type all information, except signatures Please print or type all information Please print or type all in
Fill in dates: Reporting Period Beginning May 9. 2015 Ending Tun 15, 2015 Type of report: (Check one) 8th day preceding preliminary
Sth day preceding preliminary 8th day preceding election 130 day after election 130 day
Full Name of Candidate (if applicable) Committee Name Committee Treasurer Name of Committee Treasurer Name of Committee Treasurer To River Hill Ro Modurer Madoress Committee Malling Address Tel. No. (optional) Tel. No. (optional) Tel. No. (optional) SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Summary
Line 1: Ending balance from previous report \$ 45.62
Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used Converse Susses
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 (in ink) Date

Afficiarli of Candidate: (check I hox only)
Candidate with Committee and no activity independent of the committee
The second secon
Committee in accordance to authority or on behalf of this continues in accordance with the requirement
possibilities, inclined any liabilities not made any expenditures on my benalt muting dus reporting possess.
Candidate without Committee OR Candidate with independent activity filling separate report Candidate without Committee OR Candidate with independent activity filling separate report 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 campail 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 campail
certify that I have examined this report including attached schedules and it is, to the best of my schedules and it is, to the best of my schedules and it is, to the best of my schedules and it is, to the best of my schedules are the schedules and it is, to the best of my schedules are the schedules and it is, to the best of my schedules are the schedules and it is, to the best of my schedules are the sch

finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and funance 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:

VWU 15, 2015

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date ceived	Name and Residential Address (alphabetical listing required)	Amoun	Occupation & Employer (for contributions of \$200 or more)		
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1		* 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Line 9:	Total receipts in excess of \$50 (or listed above)	1 (O) (1)			
Line 10	: Total receipts \$50 and under* (not listed above)	0			
	: TOTAL RECEIPTS IN THE PERIOD	0,0	Enter on page 1, line 2		

^{*} If you have itemized receipts of \$50 and under include them in line 9 Page 2

COMMITTEE TO ELECT FRED 10. LEVILLE STEENDITURES

G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep tailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added zether, from committee records, and reported on line 13.

is page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

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		;	Line 12:	Expenditures	over \$50	0	
	inter on page 1, line 4	7			s \$50 and under* PENDITURES		00

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			les de la companya de	
·		Line 15:	In-kind over \$50	0
			In-kind \$50 and under	
	Enter on page 1, line 6	Line 17	: Total In-kind	2

[•] 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
10/23/98	FRED W. LEYIN	Uchmert WH DSOCI	CASH ACCOUNT	20000
10/27/98	FRED N. LEVID	HORWELL MA OSOCI	CACH ACCOUNT	500€
10/15/18	Fear W. Levin	75 RIDGE HILL RO HORNELL MA 020G1	POSTAGE ENTH ACCOUNT PRINTING/MAICING	2000
10/24/98	FRED 10, LEVIN	76 RIDGE HILL RD	POSTAGE CASH ACCOUNT	120000
11/2/98	FRED W. LEYIN	HORMET WY OSOCI	CHEN ACCOUNT	1000 %
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	4000 00