

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

Office of Campaign and Political Finance

JUN 1 1 2012

TOWN CLERK PATRICIA A. ANDERSON

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 5	1/12 Ending Date: 6/8/12
Type of Report: (Check one)	
	30 day after election year-end report dissolution
	I loved in the current
Candidate Full Name (if applicable)	Invest in Norwell Committee Name
Calabase 2 and Calabase (Calabase Calabase Calab	
Office Sought and District	Name of Committee Treasurer
	PO Box 922 Norwell mA 02061
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALANC	E INEODMATION:
SUMMART DALANC.	E INFORMATION.
Line 1: Ending Balance from previous report	2673.66
Line 2: Total receipts this period (page 3, line 11)	745.00
Line 3: Subtotal (line 1 plus line 2)	3418.66
Line 4: Total expenditures this period (page 5, line	e 14) 3418.66
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period (page	ge 6) 1177.45
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: Scitua	te Federal Savings
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 of finance activity of all persons acting under the authority or on behalf of this committee in a	contributions and liabilities for this reporting period and represents the campaign
Signed under the penalties of perjury: Kau C. Full	(Treasurer's signature) Date: 6/8/12
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo)	x 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 activity, of all persons acting under the authority or on behalf of this committee in act incurred any liabilities nor made any expenditures on my behalf during this reporting	best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period.
Candidate without Committee OR Candidate with independent activity filing set 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 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
Signed under the panalties of parings:	(Condidatele nigrature) 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)		
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		Your work of the state of the s	·		
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			THE VIEW IN THE VI		
ine 9: Total Receip	ots over \$50 (or listed above) a Hacked	545			
ine 10: Total Recei	pts \$50 and under* (not listed above)	200			
ine 11: TOTAL R	ECEIPTS IN THE PERIOD	745	← 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.

Invest In Norwell Receipts Schedule A of Form CPF M 102

Contributions in Excess of \$50 (list alphabetically; if \$200 or more need occupation & employer)

Date	Name	Address	Am	ount	Occupation	Employer
5/8/201	2 Chapin, Marshall & Jennifer	16 Henrys Lane Norwell MA 02061	\$	100		
5/13/201	2 Jenny B. Companies LLC	45 E. Main St Westborough MA 01581	\$	295	Retail - Jewelry & Accessories	
5/21/201	2 Murphy, Kristina	75 Riverside Drive Norwell MA 02061	\$	150		
	Subtotal		\$	545		

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.)

port all expenditures. Please include your committee name and a page number on each page.) To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
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200					
			500	<u> </u>	
		Line 12: Total Expenditures ov	er \$50 (or listed above) a kachrol	3418.6	
				0	
Line 13: Total Expenditures \$50 and under* (not listed above)					
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	3418.6	

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

Page 4

Committee Name: Invest in Norwell Schedule B: Expenditures Page 1

Expenditures > \$50

Date Paid To Whom Paid	Address	Purpose of Expenditure	Amount
5/2/2012 Image Resolutions	382 Washington St Norwell MA 02061	friend to friend postcards	\$ 365.00
5/9/2012 Image Resolutions	382 Washington St Norwell MA 02061	friend to friend postcard reprint	\$ 292.08
5/16/2012 Image Resolutions	382 Washington St Norwell MA 02061	2nd direct mail piece	\$ 1,247.45
6/6/2012 Norwell Education Foundation	P.O. Box 711 Norwell, MA 02061	remainder of funds donated	\$ 245.38
5/16/2012 Stoddard, Maryellen	958 Main Street Norwell MA 02061	reimbursement for 75 more lawn signs (Sign Depot Orlando FL)	\$ 515.00
5/2/2012 Weier, Jennifer	55 Bowker St Norwell MA 02061	reimbursement for "vote today" stickers & "I voted today" stickers	\$ 486.00
5/16/2012 White, Paula	2 Brattle Road Norwell MA 02061	reimbursement for vinyl banners (Westongraphics Hingham)	\$ 267.75
		Subtotal	\$ 3,418.66

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
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	1177.45
		Line 16: In-Kind Contributions		T
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C	CONTRIBUTIONS	1177.45

^{*} 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.

Page 6

Committee Name: Invest in Norwell Schedule C: In-Kind Contributions Page 1

In Kind Contributions > \$50

Date	From Whom Received	Address	Description of Contribution	Value
	12 Lindblom, Jennifer & Rich 12 Sullivan, Marianne	5 Fieldstone Way Norwell MA 02061 96 Farrar Farm Rd Norwell MA 02061	70 lawn signs paid for printing additional 500 flyers	\$ 1,050.00 \$ 127.45
			Subtotal	\$ 1,177,45

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
Processing the state of the sta				
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	