

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 10/30	1/2017 Ending Date: 12/7/2017 12/31/2017
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	230 day after election year-end report dissolution
Edmund P Harrington	Committee to Elect Ed Harrington
Candidate Full Name (if applicable)	Committee Name
Office Sought and District	Cheryl B Harrington Name of Committee Treasurer
54 Samoset St Weymouth MA 02190	54 Samoset St Weymouth MA 02190
Residential Address	Committee Mailing Address
E-mail: harra6@comcast.net	E-mail: harra6@comcast.net
Phone # (optional):	Phone # (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	398.03
Line 2: Total receipts this period (page 3, line 11)	100
Line 3: Subtotal (line 1 plus line 2)	498.03
Line 4: Total expenditures this period (page 5, lin	ne 14) 1,820
Line 5: Ending Balance (line 3 minus line 4)	-1,321.97
Line 6: Total in-kind contributions this period (pa	age 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	1,321.97
Line 8: Name of bank(s) used: Equitable Bank	
	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date:
FOR CANDIDATE FILINGS ONLY; Affidavit of Candidate: (check 1 bo	ox only)
	e best of my knowledge and belief, a true and complete statement of all campaign finance coordance with the requirements of M.G.L. c. 55. I have not received any contributions, a period.
Candidate without Committee OR Candidate with independent activity filing see  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 the	best of my knowledge and belief, a true and complete statement of all campaign s, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature)

#### **SCHEDULE A: RECEIPTS**

vegr Committees must keen detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the

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.)

Name and Residential Address Occupation & Employer				
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
11/6/2017	James Bristol III	100		
11/6/2017	14 Sandtrap Circle Weymouth, MA 02190			
			1	
		1		
Line 9: Total Reco	eipts over \$50 (or listed above)	100		
10 5 15			]	
Line 10: Total Rec	eipts \$50 and under* (not listed above)	0		
			← Enter on page 1, line 2	
2 11 PROPERTY	RECEIPTS IN THE PERIOD	1001	← Enter on page 1, line 2	

<sup>\*</sup> 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 Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
Line 11: TOTAL R	RECEIPTS IN THE PERIOD		Enter on page 1, line 2

<sup>\*</sup> 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**

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/28/2017	East Coast Printing	2 Kelth Way Hingham MA	leaflet printing & mailing	859.53
11/4/2017	East Coast Printing	2 Keith Way Hingham MA	leaflet printing and malling	960.47
		Line 12: Total Expenditures o	ver \$50 (or listed above)	1,82
		Line 13: Total Expenditures \$5	50 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	1,82

<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. Page 4

# **SCHEDULE B: EXPENDITURES (continued)**

	T- When Dell					
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount		
		T 1 10. E 11	O (on listed all area)			
		Line 12: Expenditures over \$50	(or listed above)			
		Line 13: Expenditures \$50 and	under* (not listed above)			
	Finter on page 1 line 1 ->	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD			
TC 1 14			should include only those expenditur	es not itemized		

<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.

## 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 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: In-Kind Contributions over \$50 (or listed above)		
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	CONTRIBUTIONS	

<sup>\*</sup> 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.

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#### SCHEDULE D: LIABILITIES

as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
11/4/2017	Ed Harrington	54 Samoset St Weymouth MA	Loan to Campaign	1,321.97
				La I

Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)