

# Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

LYNN ELECTION OFFICE

2013 SEP -5 D 2: 35
Delta Year 8 2013
ear-end report  dissolution
A Lorraine Gately  Gan  Treasurer
Tel. No. (optional)
0.00 1290.00 1290.00 1938.44 351.56

File with:

City or Town Clerk or Election Commission Please print or type all information, except signatures.

Fill in dates:  Reporting Period Beginning  Month  Date  Ye		Date S	2013
Type of report: (Check one)  Sth day preceding preliminary □8th day preceding election	on □30 day after election	n □year-end report	dissolution
Full Name of Candidate (if applicable)  LYNN School Committee  Office Sought and District  123 Edgenere Rd  Residential Address  Tel. No. (optional)	Name of Cor	Mailing Address	(optional)
SUMMARY BALA  Line 1: Ending balance from pre  Line 2: Total receipts this period  Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this p  Line 5: Ending balance (line 3 minus  Line 6: Total in-kind contributions  Line 7: Total (all) outstanding liabil  Line 8: Name of bank(s) used	(page 2, line 11)  eriod (page 3, line 14)  s line 4)  this period (page 4)  lities (page 4)	N: \$ 0.00 \$ 4,290.00 \$ 4,290.00 \$ 2,938.41 \$ 1,351.56 \$ 612.44	
Wilin Cogan	rements, in-kind contributions and	i liabilities for this reporting	period and represents the
Treasurer's signature (in ink)  FOR CANDIDATE FILINGS	ONLY: (CANDIDATE MI	IST SIGN BELOW	
Affidavit of Candidate: (check 1 box only)  Candidate with Committee and no activity independent of the committee and no activity independent of the committee activity, of all persons acting under the authority or on behalf of this contributions, incurred any liabilities nor made any expenditures on my behalf of candidate without Committee OR Candidate with Independent activity that I have examined this report including attached schedules and it finance activity, including contributions, loans, receipts, expenditures, diabute campaign finance activity of all persons acting under the authority or on behalf of the condidate signature (in ink)	ttee  s, to the best of my knowledge and committee in accordance with the r during this reporting period.  ty filing separate report  s, to the best of my knowledge and sements, in-kind contributions and  If of this committee in accordance we	belief, a true and complete s equirements of M.G.L. c. 55 belief, a true and complete s liabilities for this reporting	tatement of all campaign

## 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.

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

number on each page. Amount Occupation & Employer Name and Residential Address Date (for contributions of \$200 or more) (alphabetical listing required) Received Kathy Colmon 900°0 9100 8/10 2001 bo 200 north shore Plum 5. + Hetry 350 00 \$60 00 100 Line 9: Total receipts in excess of \$50 (or listed above) SILIO Line 10: Total receipts \$50 and under\* (not listed above) \$ 3.180 '

Enter on page 1, line 2

Line 11: TOTAL RECEIPTS IN THE PERIOD

<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.

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### 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.

This page may be copied 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	
75/13	LORRAGE	123Edgeneurd Lynn ma	Semburgement	300	00
7/29	Gately Park Press Printers	l' l'	for comp Supplis	165	75
8/8	Parkles		Bumper STICKES Bumper STICKES Palm Cends Lawn Signs	165	75
8/20	Park Press		Bumpu STICILES	420	75
8/20	Park Press		Polm Courd	545	- 06
8/23.	Parkfress		laun signs	1285	63
	,			U	
			•		
		Line 12	Expenditures over \$50	2882	90
			: Expenditures \$50 and under*		X
	Enter on page 1, line 4	Line 1	4:TOTAL EXPENDITURES	2938	44

<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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### 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	From Whom Received*	Residential Address	Description of	Value
Received		<u> </u>	Contribution	
\$23	Bub Rotondo		BRUIN TICKOS for Quetin	9250 W
				·
		Line 15:	In-kind over \$50	250
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	<sup>4</sup> 250*

<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.

#### 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
6/20	LORRain Gately	123 Edgemere Rd Lyng, ma	Supplies	74.38
6/13	Lornand	123 Edgmee Rd	Supplies	26%.03
6/13	Loresaint Gately	123 Edgemene Rel Lynn, ma 123 Édgemene Rel Lynn, ma	Comp Supplis	269.03
		, ,	•	
Enter on page 1, line 7		Line 18: OUTSTANDING LIABILITIES (ALL)		612.44

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

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