



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

NOV 12 2013

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Office of Campaign and Political Finance

At 2 o'clock 10 minutes P M

Martin Romeau
Title with City or Town Clerk of Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-2013 Ending Date: 10/18/13

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Jennifer M. Breen
Candidate Full Name (if applicable)
City Council North Adams
Office Sought and District
31 Autumn Drive North Adams
Residential Address
Telephone Number (optional): 413 663800

Committee Name
Name of Committee Treasurer
Committee Mailing Address
Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0.00</u>
Line 2: Total receipts this period (page 3, line 11)	<u>2825</u>
Line 3: Subtotal (line 1 plus line 2)	<u>2825</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>2825</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>2825</u>
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	<u>0.00</u>
Line 8: Name of bank(s) used:	<u>Adams Community Bank</u>

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) Date: 11/12/13

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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
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: 11/12/13

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)
9/22/13	John Franconi / Ellen Sutlerland 83 North St North Adams MA	50 ^{.00}	School VP / School / assistant
9/20/13	John DeLosa 54 Pinehill Terrace North Adams MA	50 ^{.00}	city solicitor
9/18/13	David Willette 150 Oak Hill North Adams MA	50 ^{.00}	retired
9/16/13	James E. Montgare 100. McLaughlin St Williamstown, MA 01267	50 ^{.00}	superintendent
9/14/13	Andrew P. Zito JR 97 Wells Ave North Adams MA	50 ^{.00}	retired
9/16/13	Maria A. Diamond 40 Marion Ave North Adams MA	50 ^{.00}	retired
9/16/13	Claire Angeli North Adams Terrace North Adams MA	50 ^{.00}	retired
9/15/13	J.M. Grinnell PO Box 713 North Adams MA	50 ^{.00}	retired
9/18/13	Williamstown MA Paul + Kathy Catefotti 628 Stafford Hill Dorchester MA	100 ^{.00}	insurance sales / retired nurse
9/21/13	Peter and Maren Ellen Green 24 Charlene St North Adams MA	50 ^{.00}	teacher / vice-principal
9/14/13	Harris Elder 4 Marion Ave North Adams MA	50 ^{.00}	retired
9/30/13	North Adams MA Cmte to Elect Tom Boulter	100 ^{.00}	Sheniff's CMTE

Line 9: Total Receipts over \$50 (or listed above) ~~2750~~ 2750

Line 10: Total Receipts \$50 and under* (not listed above) 100

Line 11: TOTAL RECEIPTS IN THE PERIOD 2850 ← 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

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)
9/24/13	Martha Coakley 46 Coolidge Row Medford MA 02155	100. ⁰⁰	MA Attorney General
9/27/13	Alan L. Marden 508 W Main St North Adams MA	50. ⁰⁰	Real Estate
Line 9: Total Receipts over \$50 (or listed above)			← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

* 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
10/15/13	Keith Bona us postal service	59 main st North Adams	mailing	800.00
9/27/13	Becks Printing	121 Union St North Adams	invitations + envelopes	338.25
9/23/13	Keith Bona	59 main st North Adams	tee shirts/ signs	639.38
11/12/13	Keith Bona	59 main st North Adams	mailers	992.50
11/12/13	Keith Bona	59 main st	tee shirts/ pins	207.84
9/25/13	Public eat + drink	Holden St North Adams	food / fundraiser	135.49
Line 12: Total Expenditures over \$50 (or listed above)				3,111.00
Line 13: Total Expenditures \$50 and under* (not listed above)				0.00
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				3,111.00

* 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 16 on page 1.

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

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
9/23/13	Keith Bona		shirts / signs	439. ²⁵
11/12/13	Keith Bona		Signs / markers	207. ⁸⁴
11/12/13	Keith Bona		pins / shirts	992. ⁵⁰
9/27/13	Becks		invitations / envelopes	338. ⁵⁰
Enter on page 1, line 7 →				
Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				2178. ⁰⁹