



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
HARVARD TOWN CLERK

12 MAY 29 PM 2:19

File with:

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

Fill in dates:

Reporting Period Beginning Month: April Date: 22 Year: 2012 Ending Month: May Date: 31 Year: 2012

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☒ 30 day after election ☐ year-end report ☐ dissolution

LUCY WALLACE

Full Name of Candidate (if applicable)

BOARD OF SELECTMEN

Office Sought and District

18 ORCHARD HILL RD

Residential Address

HARVARD, MA 01457

Tel. No. (optional)

COMMITTEE TO ELECT LUCY WALLACE

Committee Name

WILLIE WICKMAN

Name of Committee Treasurer

PO BOX 177

Committee Mailing Address

HARVARD, MA 01457

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 1227.39
Line 2: Total receipts this period (page 2, line 11) \$ 917.45
Line 3: Subtotal (line 1 plus line 2) \$ 2144.84
Line 4: Total expenditures this period (page 3, line 14) \$ 2144.84
Line 5: Ending balance (line 3 minus line 4) \$ -0-
Line 6: Total in-kind contributions this period (page 4) \$ 184.00
Line 7: Total (all) outstanding liabilities (page 4) \$ -0-
Line 8: Name of bank(s) used Enterprise Bank & Trust

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

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box 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 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 OR Candidate with independent activity filing separate report

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 signature (in ink)

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.

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
4/26	Rudy and Kara Minar Still River, MA @ 125.00	250	00	
Line 9: Total receipts in excess of \$50 (or listed above)		250	00	
Line 10: Total receipts \$50 and under* (not listed above)		667	45	
Line 11: TOTAL RECEIPTS IN THE PERIOD		917	45	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 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	
4/23	USPS	Harv. MA	stamps	54	00
4/30	Benchmark Graphics	175 E Bawthill Rd	printing card	179	52
4/30	Benchmark Graphics	175 E Bawthill Rd	printing, mailing	530	00
5/21	Lucy Wallace	18 Orchard Hill, Harv.	buttons	257	92
4/23	Harvard Press	Shill River Rd, Harv.	newspaper ad	697	50
4/24	USPS	Harv, MA	mailer	331	86
4/24	USPS	Harv, MA	stamps	80	00
Line 12: Expenditures over \$50				2144	84
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				2144	84

Enter on page 1, line 4

*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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
4/23	Marie Sobalvarro	St. John Ln. Haw. MA	Stamps	64.00
4/26	Virginia Justice	Woodside Rd Haw, MA	Food for coffee	120.00
Line 15: In-kind over \$50				184.00
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				184.00

Enter on page 1, line 6

* 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
Line 18: OUTSTANDING LIABILITIES (ALL)				

Enter on page 1, line 7



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
HARVARD TOWN CLERK

12 MAY 31 AM 10:39

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

4/14/12

Ending Date:

5/31/12

Type of Report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☒ 30 day after election

☐ year-end report

☐ dissolution

RHONDA SPRAGUE

Candidate Full Name (if applicable)

SELECTMAN

Office Sought and District

160 PROSPECT HILL RD HARVARD

Residential Address

Telephone Number (optional):

SELECT RHONDA SPRAGUE

Committee Name

DOUGLAS LEE

Name of Committee Treasurer

160 PROSPECT HILL RD HARVARD

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

151.42

Line 2: Total receipts this period (page 3, line 11)

1,100.00

Line 3: Subtotal (line 1 plus line 2)

1,251.42

Line 4: Total expenditures this period (page 5, line 14)

702.20

Line 5: Ending Balance (line 3 minus line 4)

549.22

Line 6: Total in-kind contributions this period (page 6)

0.00

Line 7: Total (all) outstanding liabilities (page 7)

4,838.42

Line 8: Name of bank(s) used:

ROLLSTONE BANK

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:

Douglas Lee

(Treasurer's signature)

Date:

5/31/12

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box 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 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 OR Candidate with independent activity filing separate report

☐ 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:

Rhonda Sprague

(Candidate's signature)

Date:

5/31/12

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)
4/9/12 4/24/12	COTE, GEORGE 9 CRAGGS RD HARVARD, MA 01451	100.00	
5/1/12	DOWD, LISA 323 W. MAIN ST AYER, MA 01432	250.00	OCCUPATION - VP & GEN MGR EMPLOYER - GRADY RESEARCH
5/1/12	GRADY, JOHN 43 SLOUGH RD HARVARD, MA 01451	500.00	OCCUPATION - ENGINEER EMPLOYER - GRADY RESEARCH
4/25/12	SKAVEN-HINCHLIFFE, DEBRA 221 STILL RIVER RD STILL RIVER, MA 01467	100.00	
4/30/12	THERRAULT, JOSEPH 23 TAHANTO TRAIL HARVARD, MA 01451	100.00	
Line 9: Total Receipts over \$50 (or listed above)		1,050.00	
Line 10: Total Receipts \$50 and under* (not listed above)		50.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,100.00	← 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 (continued)[illegible]

* 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
4/23/12	HARVARD PRESS	P.O. Box 284 HARVARD, MA	FULL PAGE AD	697.50
			Line 12: Total Expenditures over \$50 (or listed above)	697.50
			Line 13: Total Expenditures \$50 and under* (not listed above)	4.70
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	702.20

* 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 B: EXPENDITURES (continued)[illegible]

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

[illegible]

0.00

0.00

0.00

Page 6

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
4/4/12	WHIT SPRAGUE	160 PROSPECT AVENUE HARVARD, MA 01451	FOOD ORGANIZATION MTG	99.29
4/9/12	"	"	WEB SITE SIGNS	52.13
4/19/12	"	"	CORRUGATED SIGNS	1,214.97
4/19/12	"	"	CAMPAIGN BUTTONS	112.00
4/20/12	"	"	INTERNET ACCESS PIZZA FOR STANDOUTS	107.41
5/10/12	"	"	MAGNETIC SIGNS	459.55
5/10/12	"	"	MISC ITEMS / SODA THANK YOU MEETING	24.30
5/10/12	"	"	FOOD FOR THANK YOU MEETING	308.12
5/10/12	"	"	DONUTS & COFFEE STANDOUTS	29.91
5/10/12	"	"	MISC ITEMS FOR MEETING	38.37
5/30/12	ISS	2 SHAKER RD SHIRLEY, MA 01464	3 PRINTING AND MAILINGS	2,392.37
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				4,838.42



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
HARVARD TOWN CLERK

12 MAY 31 PM 2:26

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

Year

Month

Date

Year

April

22

2012

Ending May

31

2012

Type of report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☒ 30 day after election

☐ year-end report

☐ dissolution

Sharon M. McCarthy

Full Name of Candidate (if applicable)

Board of Health

Office Sought and District

90 E. Bare Hill Rd

Residential Address

Harvard, MA 01481

Tel. No. (optional)

Comm. to Elect Sharon McCarthy

Committee Name

Willie Wilman

Name of Committee Treasurer

PO Box 177

Committee Mailing Address

Harvard, MA 01481

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report

\$ 106.55

Line 2: Total receipts this period (page 2, line 11)

\$ 777.87

Line 3: Subtotal (line 1 plus line 2)

\$ 884.42

Line 4: Total expenditures this period (page 3, line 14)

\$ 884.42

Line 5: Ending balance (line 3 minus line 4)

\$ -0-

Line 6: Total in-kind contributions this period (page 4)

\$ -0-

Line 7: Total (all) outstanding liabilities (page 4)

\$ -0-

Line 8: Name of bank(s) used Enterprise Bank Trust

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

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box 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 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 OR Candidate with independent activity filing separate report

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 signature (in ink)

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.

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
5/21	Sharon McCarthy ^{\$} Jim Ware	241	63	
Line 9: Total receipts in excess of \$50 (or listed above)		241	63	Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)		536	24	
Line 11: TOTAL RECEIPTS IN THE PERIOD		777	87	

* 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.

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	
4/23	Clinton Offsetprint	High Street, Clinton, MA	mailer printer	403	75
4/23	Harvard Press	5711 River Rd, Harv.	ad	189	00
4/24	USPS	Harv, MA	mailing	291	67
Line 12: Expenditures over \$50				884	42
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				884	42

Enter on page 1, line 4

*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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

Enter on page 1, line 6

* 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
			Line 18: OUTSTANDING LIABILITIES (ALL)	

Enter on page 1, line 7

revised

Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
HARVARD TOWN CLERK

12 DEC 11 PM 10:27

Fill in Reporting Period dates:

Beginning Date:

4/14/12

Ending Date:

5/31/12

File with: City or Town Clerk or Election Commission

Type of Report: (Check one)

- ☐ 8th day preceding preliminary
 ☐ 8th day preceding election
 ☒ 30 day after election
 ☐ year-end report
 ☐ dissolution

RHONDA SPRAGUE

Candidate Full Name (if applicable)

SELECTMAN

Office Sought and District

160 PROSPECT HILL RD HARVARD

Residential Address

Telephone Number (optional):

SELECT RHONDA SPRAGUE

Committee Name

DOUGLAS LEE

Name of Committee Treasurer

160 PROSPECT HILL RD HARVARD

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

700.00

Line 2: Total receipts this period (page 3, line 11)

6,100.00

Line 3: Subtotal (line 1 plus line 2)

1,800.00

Line 4: Total expenditures this period (page 5, line 14)

702.20

Line 5: Ending Balance (line 3 minus line 4)

1,097.80

Line 6: Total in-kind contributions this period (page 6)

0.00

Line 7: Total (all) outstanding liabilities (page 7)

4,838.42

Line 8: Name of bank(s) used:

ROLLSTONE BANK

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:

Douglas Lee

(Treasurer's signature)

Date:

5/31/12

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box 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 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 OR Candidate with independent activity filing separate report

- ☐ 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:

Rhonda Sprague

(Candidate's signature)

Date:

5/31/12

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)
4/9/12 4/24/12	COTE, GEORGE 9 CRAGGS RD HARVARD, MA 01451	100.00	
5/1/12	DOWD, LISA 323 W. MAIN ST AYER, MA 01432	250.00	OCCUPATION, VP & GEN MGR EMPLOYER- GRADY RESEARCH
5/1/12	GRADY, JOHN 43 SLOUGH RD HARVARD, MA 01451	500.00	OCCUPATION- ENGINEER EMPLOYER- GRADY RESEARCH
4/25/12	SKAUVEN-HINCHLIFF, DEBRA 221 STILL RIVER RD STILL RIVER, MA 01467	100.00	
4/30/12	THERIAULT, JOE 23 TAHONTA TRAIL HARVARD, MA 01451	100.00	
Line 9: Total Receipts over \$50 (or listed above)		1,050.00	
Line 10: Total Receipts \$50 and under* (not listed above)		50.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,100.00	← 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 (continued)[illegible]

← 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 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
4/03/12	HARVARD PRESS	P.O. Box 284 HARVARD, MA	FULL PAGE AD	697.50
			Line 12: Total Expenditures over \$50 (or listed above)	697.50
			Line 13: Total Expenditures \$50 and under* (not listed above)	4.70
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	702.20

* 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 B: EXPENDITURES (continued)[illegible]

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

* 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
4/4/12	WHIT SPRAGUE	160 PROSPECT HILL RD HARVARD, MA 01451	FOOD ORGANIZATION MTG	99.29
4/9/12	"	"	WEB SITE SIGNS	52.13
4/19/12	"	"	CORRUGATED SIGNS	1,214.97
4/19/12	"	"	CAMPAIGN BUTTONS	112.00
4/20/12	"	"	INTERNET ACCESS PIZZA FOR STANDOUTS	107.41
5/10/12	"	"	MAGNETIC SIGNS	459.55
5/10/12	"	"	MISC ITEMS & SODA THANK YOU MEETING	24.30
5/10/12	"	"	FOOD FOR THANK YOU MEETING	308.12
5/10/12	"	"	DONUTS & COFFEE STANDOUTS	29.91
5/10/12	"	"	MISC ITEMS FOR MEETING	38.37
5/30/12	ISS	2 SHAKER RD SHIRLEY, MA 01464	3 PRINTING AND MAILINGS	2,392.37
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				4,838.42

