

Form CPF M 102: Campaign Finance Report Municipal Form RECEI

Office of Campaign and Political Finance

RECEIVED HARVARD TOWN CLERK

13 APR 22 AM 9: 46

Type of Report: (Check one) Sth day preceding preliminary Sth day preceding election 30 day after election year-end report dissolution		File with: City or Town Clerk or Election Commission
Sth day preceding preliminary	Fill in Reporting Period dates: Beginning Date: 4/2	2/13 Ending Date: 4/22/13
Sth day preceding preliminary	Type of Report: (Check one)	
Candidate Full Name (if applicable) PLPNNING BOAK) Office Sought and District Name of Committee Treasurer PLPNNING BOAK) Residefulal Address Telephone Number (optional): SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 6) Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used: Entry Substance (line 3 minus line 4) Affdavit of Committee Treasurer: Lertify 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. FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check I box only) Candidate with Committee and on activity independent of the committee Committee Value Committee Treasurer:		30 day after election year-end report dissolution
Office Sought and District Name of Committee Treasurer POSIC 204 STULNER, MA 01447 Residential Address Telephone Number (optional): SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 6) Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used: Enterprise Manuel Address Affidavit of Committee Treasurer: Lertify 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, disbussements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity, including all contributions, loans, receipts, expenditures, disbussements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity, including all contributions, loans, receipts, expenditures, disbussements, 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. FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee Cartifythat 1 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 independent of the committee in accordance with the requirements of M.G.L. c. 55. I have necessarily to activity of all persons activity of all persons acting under the authority on on behalf of this committee in accordance with the requi		
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Line 8: Name of bank(s) used: Enternse Bank I Toust 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) 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 activity in the requirements of M.G.L. c. 55. I have not received any activity in the requirements of M.G.L. c. 55. I have not received any activity in the requirements of M.G.L. c. 55. I have not received any activity in the requirements of M.G.L. c. 55. I have not received any activity in the requirements of M.G.L. c. 55. I have not received any activity in the requirements of M.G.L. c. 55. I have not received any activity in the requirements of M.G.L. c. 55. I have not received any activity in the requirements of M.G.L. c. 55. I have not received any activity in the requirements of M.G.L. c. 55. I have not received any activity in the requirements of M.G.L. c. 55. I have not received any activity in the requirements of M.G.L. c. 55. I have not received any activity in the requirements of M.G.L. c. 55. I have not received any activity in the requirement of M.G.L. c. 55. I have not received any activity in the requirement of M.G.L. c. 55. I have not received any activity i	Line 6: Total in-kind contributions this period (pa	ge 6) O
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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.	l 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 accordance with the requirements of M.G.L. c. 55.
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incurred any liabilities nor made any expenditures on my behalf during this reporting period.	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 cordance with the requirements of M.G.L. c. 55. I have not received any contributions
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's signature) Date:	Candidate without Committee OR Candidate with independent activity filing sep 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 committee in accordance with the requirements of M.G.L. c. 55.

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

eport all receipts. Please include your committee name and a page number on each page.)

The second secon	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
			The second of th
	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1000 0,000 000
			a me i a di i
-			
ine 9: Total Rec	eipts over \$50 (or listed above)		
	eipts \$50 and under* (not listed above)	125.00	
ine 11. TOTAL	RECEIPTS IN THE PERIOD	125,W	← 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)

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)		
	pts \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD	0. Line 10 about	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 letailed 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)	nittee name and a page number on Address	Purpose of Expenditure	Amount
-419-	VISTAPRINT	95 HAYDEN AVE LEXINGTON, MA 02421	car magnets	112.21
		Line 12: Total Expenditures o	ver \$50 (or listed above)	112.21
		Line 13: Total Expenditures \$5	50 and under* (not listed above)	
	Enter on page 1, line 4 →		FURES IN THE PERIOD	112.21

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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	s en		1,5 - , 1, 2, 200 - , 200	a seems as
	. T			
]		
	3) 2)			
	- 14			
		Line 12: Expenditures over \$	50 (or listed above)	
		Line 13: Expenditures \$50 and	d under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	ITURES IN THE PERIOD	

^{*} 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
		Line 15: In-Kind Contributions	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C		D agme and address

^{&#}x27;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

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
] [
	*			
	1 = 1 1			
		1		
	Enter on page 1 line 7 -	Line 18: TOTAL OUTSTA	NDING LIABILITIES (ALL)	0



Form CPF M 102: Campaign Finance Report Municipal Form RECEIVED HARVARD TOWN CLERK

Office of Campaign and Political Finance

13 APR 22 AM 9: 47

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 4/2/	13 Ending Date: 4/22/13						
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	30 day after election year-end report dissolution						
James Breslauer	Committee to Elect James Breslauer						
Candidate Full Name (if applicable)	Committee Name						
Planning Board	Willie Wickman						
Office Sought and District	Name of Committee Treasurer						
130 Poor Farm Road, Harvard, MA 01451	POBox 77, Harvard, MA 01451						
Residential Address	Committee Mailing Address						
Telephone Number (optional):	Telephone Number (optional):						
SUMMARY BALANO	CE INFORMATION:						
Line 1: Ending Balance from previous report	O						
Line 2: Total receipts this period (page 3, line 11	125						
Line 3: Subtotal (line 1 plus line 2)	125						
Line 4: Total expenditures this period (page 5, lin	ne 14) 112.21						
Line 5: Ending Balance (line 3 minus line 4)	12.79						
Line 6: Total in-kind contributions this period (p.							
Line 7: Total (all) outstanding liabilities (page 7)	0						
Line 8: Name of bank(s) used: Enterprise Bank and	d 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: Date: 4/22/13							
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: (Candidate's signature) Date: 4/22/13							

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.)

port all receipts. Please include your committee name and a page number on each page.)					
	Name and Residential Address		Occupation & Employer (for contributions of \$200 or more)		
Date Received	(alphabetical listing required)	Amount	(10r contributions of \$200 of more)		
Line 9: Total Rec	eipts over \$50 (or listed above)				
		125.00			
Line 10: Total Red	eeipts \$50 and under* (not listed above)	125.00			
I 11. TOT AT	RECEIPTS IN THE PERIOD	125.00	← Enter on page 1, line 2		
Line II: IOIAL	RECEIPTS IN THE PERIOD		Id include only those receipts not itemized above.		

^{*} 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)
ne 9: Total Receip	ts over \$50 (or listed above)		
ne 10: Total Receip	ots \$50 and under* (not listed above)		
	ECEIPTS 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.)

•	ditures. Please include your com To Whom Paid			24
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	Vistaprint	95 Hayden Avenue	car magnets	
/9/13		Lexington, MA 02421		112.21
				National Confession of the Con
	1			
	7			
	Control of the Contro			
				
				1
				7/
		Line 12: Total Expenditu	res over \$50 (or listed above)	112.
		Line 13: Total Expenditur	es \$50 and under* (not listed above)	
				112.
	Enter on page 1, line 4	→ Line 14: TOTAL EXPE	NDITURES IN THE PERIOD	112.

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 above.

SCHEDULE B: EXPENDITURES (continued)

To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	·t			
	7			
	×.			

		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and	under" (not listed above)	
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	
If you have item	-id C\$50 1 1	include them in line 12. Line 13 s		<u> </u>

^{*} 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
L	J L	Line 15: In-Kind Contributions	s 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 CONTRIBUTIONS				

^{*} 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

SCHEDULE D: LIABILITIES

C 11

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
] [
	Ţ.			- Company

 	Enter on page 1 line 7 -	Line 18: TOTAL OUTSTA	NDING LIABILITIES (ALL)	0

		ong vacon



Form CPF M 102: Campaign Finance Report

Municipal Form Office of Campaign and Political Finance RECEIVED HARVARD TOWN CLERK

13 APR 22 PM 2: 24

File with:

Fill in dates:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Reporting Period Beginning 3 15 2013 Ending 4	Date Year 22 ZO13				
Type of report: (Check one) ☐ 8th day preceding preliminary ☑ 8th day preceding election ☐ 30 day after election	□year-end report □dissolution				
Full Name of Candidate (if applicable) Comm CARRELYN E	n Planning Board nittee Name FRASEN				
Residential Address 21 WOODS DE RD Committee	nmittee Treasurer HAMAID Mailing Address				
Tel. No. (optional)	Tel. No. (optional)				
SUMMARY BALANCE INFORMATION	V:				
Line 1: Ending balance from previous report	\$				
Line 2: Total receipts this period (page 2, line 11)	\$ 0				
Line 3: Subtotal (line 1 plus line 2)	\$				
Line 4: Total expenditures this period (page 3, line 14)	\$				
Line 5: Ending balance (line 3 minus line 4)	\$				
Line 6: Total in-kind contributions this period (page 4)	\$ 0.				
Line 7: Total (all) outstanding liabilities (page 4)	\$ 239,40				
Line 8: Name of bank(s) used None					
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) Fraser	1/12 Pate				
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SE					
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 campaign finance activity, of all persons acting under the authority or on behalf of this committee in acco have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during the 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 campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind con and represents the campaign finance activity of all persons acting under the authority or on behalf of this con M.G.L. c. 55. Signed under the penalties of perjury:	rdance with the requirements of M.G.L. c. 55. I is reporting period.				
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)	Amo	unt	Occupation & Employer (for contributions of \$200 or more)
Line 9:	Total receipts in excess of \$50 (or listed above)	O	00	
Line 10:	Total receipts \$50 and under* (not listed above)	σ	00	
	TOTAL RECEIPTS IN THE PERIOD	Q	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 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	Amo	unt
04					
				*	
		Line 12:	Expenditures over \$50	0	00
		Line 13:	Expenditures \$50 and under*	0	00
E	Enter on page 1, line 4	Line 14:	TOTAL EXPENDITURES	0	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.

Page 3

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	0
		Line 16:	In-kind \$50 and under	0
	Enter on page 1, line 6	Line 17:	Total In-kind	0

^{*} 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
3/29	1 and 1 i com	website	239.40
	Enter on page 1, line 7	Line 18: OUTSTANDING LIABILITIES (ALL)	239.40

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.

Page 4



Form CPF M 102: Campaign Finance Report

Municipal Form

Municipal Form RECEIVED
Office of Campaign and Political Finance RECEIVED

13 APR 16 PM 3:58

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 3	-5-2013 Ending Date: 4-13-2013
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Don H. Graham	Don Graham Por Selectman
Candidate Full Name (if applicable)	Committee Name
Select man	Sherry Graham
Office Sought and District	Name of Committee Treasurer
72 Brown Rd. Harvard MA DIYSI	72 Brown Rd. Marvard DMS
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional): 978-340-555
SUMMARY BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 1)	274,25
Line 3: Subtotal (line 1 plus line 2)	274.25
Line 4: Total expenditures this period (page 5, li	ne 14) 249.25
Line 5: Ending Balance (line 3 minus line 4)	25.00
Line 6: Total in-kind contributions this period (p	age 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	
ASSAULT SCORE TO THE TOTAL STATE OF THE TOTAL STATE	
Affidavit of Committee Treasurer: 1 certify that I have examined this report including attached schedules and it is, to the best	et of my knowledge and belief a true and complete attacks.
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,	
Signed under the penalties of perjury:	(Treasurer's signature) Date: 4-15-2013
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 b	ox 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 a incurred any liabilities nor made any expenditures on my behalf during this reporting	he best of my knowledge and belief, a true and complete statement of all campaign finance ccordance with the requirements of M.G.L. c. 55. I have not received any contributions, g period.
Candidate without Committee OR Candidate with independent activity filing s I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	te best of my knowledge and belief, a true and complete statement of all campaign
Signed under the penalties of perjury:	(Candidate's signature) 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 rear. 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

eport all receipts. Please include your committee name and a page number on each page.)

eport all receipts. P	lease include your committee name and a pa	ge number on eac	Occupation & Employer
D 4 D 1	Name and Residential Address (alphabetical listing required)	Amount	(for contributions of \$200 or more)
Date Received	(aiphabetical fishing required)	Timount	
19003713			
4-16-13	Sherry Graham (114) 72 Brown Rd. Haward Ochs	25.00	
3-5-13-13	Sherry Graham 12 Brown Ed. MADIUSI	105.09	
H-7-13	DON Graham 12 Brown Rd. Hawad, NA OJUSI	144,10	
	- AV		
Line 9: Total Rec	eipts over \$50 (or listed above)	14.16	
Line 10: Total Rec	ceipts \$50 and under* (not listed above)	130.09	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	27#.25	Enter on page 1, line 2 Id include only those receipts not itemized above.

^{*} 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)
ine 9: Total Recei	pts over \$50 (or listed above)		
ine 10: Total Rece	ipts \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD		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.)

eport 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	
4-13-13	Dunkin Donuto	188 ayer Rd. Daward, MA DIEIT	refreshments at meet & greet	24.96	
3-5-13	GoDaddy	14455 N. Hayden ed Scottodale, AZ	Domain Name Website	12.18	
31513	History	Josephen	Carlots	2309	
3-5-13	Graphicsland	8061 186th St. Tinley Park, le 6048	Bumper stickers	44.95	
4-7-13	Graphicoland	8061 186th St. Tinley Park, De Wells	Bumper/window sticlurs	57.84	
3-5-13	Vistaprint	95 Neuglen Ave. Lexington, MA 09431	Business Cards	23.00	
4-7-13	Viotaprint	95 Hayden Ave. Lexington, MA 02421	Laur Signo	86.32	
4	11	Line 12: Total Expenditures ov	ver \$50 (or listed above)	1-14.16	
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	105.09	
	Enter on page 1, line 4 →		TURES IN THE PERIOD	249.25	

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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
] <u> </u>		
]		
	Ay!			
] [
				1
		Line 12: Expenditures over \$5	50 (or listed above)	
		Line 13: Expenditures \$50 and	l under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PEDIOD	

^{*} 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	
		Line 15: In-Kind Contribution	s 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 CONTRIBUTIONS				

^{&#}x27;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

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



Form CPF M 102: Campaign Finance Report Municipal Form HARVARD

Office of Campaign and Political Finance

RECEIVED HARVARD TOWN CLERK

13 APR 22 AM 9: 46

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 4/2	2/13 Ending Date: 4/22/13			
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	20 day after election			
our day preceding preminiary surface and preceding election	30 day after election year-end report dissolution			
Stu Sklar	Committee to Elect Stu Sklar			
Candidate Full Name (if applicable)	Committee Name			
Board of Selectmen	Willie Wickman			
Office Sought and District	Name of Committee Treasurer			
39 Scott Road, Harvard, MA 01451	POBox 177, Harvard, MA 01451			
Residential Address	Committee Mailing Address			
Telephone Number (optional):	Telephone Number (optional):			
SUMMARY BALAN	NCE INFORMATION:			
Line 1: Ending Balance from previous report	0			
Line 2: Total receipts this period (page 3, line 1	11) 930.00			
Line 3: Subtotal (line 1 plus line 2)	930.00			
Line 4: Total expenditures this period (page 5,	line 14) 413.42			
Line 5: Ending Balance (line 3 minus line 4)	516.58			
Line 6: Total in-kind contributions this period ((page 6) 0			
Line 7: Total (all) outstanding liabilities (page	7) 0			
Line 8: Name of bank(s) used: Enterprise Bank a	and Trust			
activity, including all contributions, loans, receipts, expenditures, disbursements, in-ki finance activity of all persons acting under the authority or on behalf of this committee Signed under the penalties of perjury:	ce in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 4/22/13			
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check I	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's signature) Date: 4/22/13			

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.)

eport all receipts. I	Please include your committee name and a pa	ige number on eac	n page.)
	Name and Residential Address	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	(10) Contributions of \$200 or more)
ł/13	Steve Finnegan 34 Oak Hill Road Harvard, MA 01451	150	
1/13	Joe Hutchinson 25 Westcott Road Harvard, MA 01451	150	
l/13	Lucy Wallace 18 Orchard Hill Road Harvard, MA 01451	75	
Line 9: Total Rec	ceipts over \$50 (or listed above)	375	
Line 10: Total Re	ceipts \$50 and under* (not listed above)	555	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	930	Enter on page 1, line 2 Id include only those receipts not itemized above.

^{*} 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	ripts \$50 and under* (not listed above)		
Line 11: TOTAL I	RECEIPTS IN THE PERIOD		← 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.)

eport 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	
4/2/13	Harvard Press	Still River Road Harvard, MA 01451	newspaper ad	189.00	
4/8/13	Vistaprint	95 Hayden Avenue Lexington, MA 02421	car magnets	224.42	
			ares over \$50 (or listed above)	413.42	
			res \$50 and under* (not listed above)		
			NDITURES IN THE PERIOD ne 13 should include only those expenditu	413.42	

^{*} 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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	0			
			0 (1 1 1 1)	
		Line 12: Expenditures over \$5		
		Line 13: Expenditures \$50 and	under* (not listed above)	
	Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD			

^{*} 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
		Line 15: In-Kind Contributions	s 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 CONTRIBUTIONS			

^{*} 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

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
	566			To the state of th
	-900 191			
] [
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	

1. (2.17)