

## Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance, VARD TOWN CLERK

of Massachusetts	File with: City or Town Clerk or Election Commission					
Fill in Reporting Period dates: Beginning Date:	Ending Date: May 8, 2013					
Type of Report: (Check one)  ☐ 8th day preceding preliminary ☐ 8th day preceding election						
Timothy Clark	Campaign to Elect Tim Clark					
Candidate Full Name (if applicable)	Committee Name					
Selectman	Tim Clark					
Office Sought and District	Name of Committee Treasurer					
114 Bolton Road Harvard MA	114 Bolton Road, Harvard MA					
Residential Address	Committee Mailing Address					
Telephone Number (optional):	Telephone Number (optional):					
SUMMARY BALANCE INFORMATION:						
Line 1: Ending Balance from previous report	0					
Line 2: Total receipts this period (page 3, line 11)	) 0					
Line 3: Subtotal (line 1 plus line 2)	0					
Line 4: Total expenditures this period (page 5, lin	Line 4: Total expenditures this period (page 5, line 14)					
Line 5: Ending Balance (line 3 minus line 4)	Line 5: Ending Balance (line 3 minus line 4)					
Line 6: Total in-kind contributions this period (pa	age 6) 0					
Line 7: Total (all) outstanding liabilities (page 7)	Line 7: Total (all) outstanding liabilities (page 7)					
Line 8: Name of bank(s) used: Rollstone Bank and	Trust					
Affidavit of Committee Treasurer:  I 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 finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:  Affidavit of Candidate: (check 1 be 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 activity, of all persons acting under the authority or on behalf during this reporting Candidate without Committee OR Candidate with independent activity filing so 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 active under the authority or on behalf of the	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: 377  Date:					
Signed under the penalties of perjury:	(Candidate's signature) Date: May 8, 2013					

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## Form CPF M 102: Campaign Finance Report Municipal Form RECEIVED Office of Campaign and Political Finance HARVARD TOWN CLERK

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Fill in Reporting Period dates: Beginning Date:	Ending Date: April 9,2013						
Type of Report: (Check one)							
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution						
William N. Johnson	Bill Johnson for Selectman						
Candidate Full Name (if applicable)	Bill Johnson for Selectman Committee Name						
Selectman, Hanard	Hlice von Loesecke						
Office Sought and District	Name of Committee Treasurer						
72 Warren Ave.	72 Warren Ale.						
Residential Address	Committee Mailing Address						
Telephone Number (optional):	¬						
reseptione reunioes (optional):	Telephone Number (optional):						
SIIMMADV DAT ANG	CE INFORMATION:						
SOMMAKI BALANC	CE INFORMATION:						
Line 1: Ending Balance from previous report	1.9/						
Line 2: Total receipts this period (page 3, line 11	1) - 0-						
Line 3: Subtotal (line 1 plus line 2)	1.91						
Line 4: Total expenditures this period (page 5, lin	ine 14) [-9]						
Line 5: Ending Balance (line 3 minus line 4)	-0-						
Line 6: Total in-kind contributions this period (pa	page 6) — O——						
Line 7: Total (all) outstanding liabilities (page 7)	0						
Line 8: Name of bank(s) used: Middlesex Savings Bank							
Affidavit of Committee Treasurer:  I 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 finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:	COMMODITIONS and liabilities for this reporting 1						
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo							
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 actincurred any liabilities nor made any expenditures on my behalf during this reporting  Candidate without Committee OR Candidate with independent activity filing se I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures disbursements	ne best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, age period.  Separate report  The best of my knowledge and belief, a true and complete statement of all campaign.						
campaign finance activity of all persons acting under the authority or on behalf of this	(Candidate's signature)  Date:						
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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 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 (alphabetical listing) Address Purpose of Expenditure Amount	-F	To Whom Paid				
Town of Haneard 84 Warren Ave, Charitable clonation \$\frac{1}{2}\]. 91    Town of Haneard   84 Warren Ave,   Charitable clonation   \$\frac{1}{2}\]. 91    Town of Haneard   84 Warren Ave,   Charitable clonation   \$\frac{1}{2}\]. 91    Town of Haneard   84 Warren Ave,   Charitable clonation   \$\frac{1}{2}\]. 91    Town of Haneard   84 Warren Ave,   Charitable clonation   \$\frac{1}{2}\]. 91    Town of Haneard   84 Warren Ave,   Charitable clonation   \$\frac{1}{2}\]. 91    Town of Haneard   84 Warren Ave,   Charitable clonation   \$\frac{1}{2}\]. 91    Town of Haneard   84 Warren Ave,   Charitable clonation   \$\frac{1}{2}\]. 91	Date Paid		Address	Purpose of Evpenditure	Amount	
Line 12: Total Expenditures S50 and under* (not listed above)	7	(arphabetten iistiig)	Addiess	z ar pose or Expenditure	Amount	
Line 13: Total Expenditures \$50 and under* (not listed above)	4/19/13	Town of Hanard	84 Warren Ave.	Charitable donation	\$1.91	
Line 13: Total Expenditures \$50 and under* (not listed above)						
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Line 13: Total Expenditures \$50 and under* (not listed above)						
Line 13: Total Expenditures \$50 and under* (not listed above)						
Line 13: Total Expenditures \$50 and under* (not listed above)						
	Line 12: Total Expenditures over \$50 (or listed above)					
Enter on page 1, line $4 \rightarrow  $ Line 14: TOTAL EXPENDITURES IN THE PERIOD $						
		Enter on page 1, line $4 \rightarrow  $ 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.

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