



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
HARVARD TOWN CLEF

14 MAR 31 PM 1:3

Fill in Reporting Period dates: Beginning Date: 1/1/14 Ending Date: 3/31/14 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

DON GRAHAM

Candidate Full Name (if applicable)

PLANNING BOARD

Office Sought and District

72 BROWN RD, HARVARD MA 01451

Residential Address

Telephone Number (optional):

COMMITTEE TO ELECT DON GRAHAM

Committee Name

SHERRY GRAHAM

Name of Committee Treasurer

72 BROWN RD, HARVARD MA 01451

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

116.43

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

0

Line 3: Subtotal (line 1 plus line 2)

116.43

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

0

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

116.43

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:

ROLSTONE 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:

Sherry Graham

(Treasurer's signature)

Date: 3-31-14

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:



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK
2014 OCT 30 AM 9:08

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 9/30/14 Ending Date: 10/27/14

Type of Report: (Check one)

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

Deb Thomson
Candidate Full Name (if applicable)

Board of Selectmen
Office Sought and District

130 Poor Farm Road, Harvard, MA 01451
Residential Address

Telephone Number (optional):

Committee to Elect Deb Thomson
Committee Name

Willie Wickman
Name of Committee Treasurer

POBox 177, Harvard, MA 01451
Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	579
Line 3: Subtotal (line 1 plus line 2)	579
Line 4: Total expenditures this period (page 5, line 14)	246.38
Line 5: Ending Balance (line 3 minus line 4)	332.62
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 and 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: Willie Wickman (Treasurer's signature) Date: 10/27/14

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: D Thomson (Candidate's signature) Date: 10/27/14

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.)

[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
10/3/14	Staples	145 Great Pond Rd, Acton, MA	copies of campaign literature	57.38
10/20/14	Harvard Press	POBox 284, Harvard, MA	ad in newspaper	189.00
			Line 12: Total Expenditures over \$50 (or listed above)	246.38
			Line 13: Total Expenditures \$50 and under* (not listed above)	
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	246.38

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



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

RECEIVED
HARVARD TOWN CLERK

2014 OCT 27 PM 2:24

File with:

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

Fill in dates:

Reporting Period Beginning Month 9 Date 27 Year 2014 Ending Month 10 Date 27 Year 2014

Type of report: (Check one)

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

Kenneth Swanton
Full Name of Candidate (if applicable)
Selectman Harvard
Office Sought and District
14 Fairbank Street, Harvard
Residential Address

Tel. No. (optional)

Committee to elect Ken Swanton
Committee Name
Pamela Maiston
Name of Committee Treasurer
14 Fairbank Street, Harvard
Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 0
Line 2: Total receipts this period (page 2, line 11) \$ 625.00
Line 3: Subtotal (line 1 plus line 2) \$ 625.00
Line 4: Total expenditures this period (page 3, line 14) \$ 162.00
Line 5: Ending balance (line 3 minus line 4) \$ 463.00
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 Bank of America

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:

Pamela Maiston
Treasurer's signature (in ink)

October 27, 2014
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:

Ken Swanton
Candidate signature (in ink)

10/27/2014
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)
10/14/14	Alexander C Combs, III	100	00	NA
10/15/14	Pamela Marston	100	00	NA
10/8/14	Nelson Northern	100	00	NA
10/21/14	Kenneth Swanton	200	00	retired
Line 9: Total receipts in excess of \$50 (or listed above)		500	00	Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)		125	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		625	00	

* 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	
10/6/14	The Harvard Press	PO Box 284	ad	\$54	00
10/14/14	The Harvard Press	PO Box 284	ad	\$54	00
10/20/14	The Harvard Press	PO Box 284	ad	\$54	00
Line 12: Expenditures over \$50				\$162	00
Line 13: Expenditures \$50 and under*				0	
Line 14: TOTAL EXPENDITURES				162	00

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
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			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

A.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: OUTSTANDING LIABILITIES (ALL)	0