



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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HARVARD TOWN CLERK

2016 APR 25 PM 2:54

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

Ending

Month

Date

Year

3

28

2016

5

12

2016

## Type of report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☒ 30 day after election

☐ year-end report

☐ dissolution

Libby Levison

Full Name of Candidate (if applicable)

Board of Health

Office Sought and District

15 Old Shirley Rd

Residential Address

Harvard, MA 01457

Tel. No. (optional)

Committee to Elect Libby Levison

Committee Name

Willie Wickman

Name of Committee Treasurer

PO Box 177

Committee Mailing Address

Harvard, MA

Tel. No. (optional)

## SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report

\$ -0-

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

\$ 508.16

Line 3: Subtotal (line 1 plus line 2)

\$ 508.16

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

\$ 508.16

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)
Line 9: Total receipts in excess of \$50 (or listed above)				Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)		508	16	
Line 11: TOTAL RECEIPTS IN THE PERIOD		508	16	

\* 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	
3/29/16	Harvard Press	PO Box 284 Harvard, MA 01457	newspaper ad	189	00
4/6/16	Harvard Press	PO Box 284 Harvard, MA 01457	newspaper ad	189	00
4/8/16	Staples	145 Great Pond Rd Acton, MA 01720	Signs	130	16
Line 12: Expenditures over \$50			508	16	
Line 13: Expenditures \$50 and under*			—		
Line 14: TOTAL EXPENDITURES			508	16	

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

*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: OUTSTANDING LIABILITIES (ALL)	- 0 -





Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
HARVARD TOWN CLERK

2016 AUG -4 PM 3:58

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 4/5/2016 Ending Date: 5/12/2016

## Type of Report: (Check one)

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

Lorin Johnson
Candidate Full Name (if applicable)
Board of Health
Office Sought and District
20 Still River Depot Rd. Stillriver, MA 01467
Residential Address
E-mail: <u>cheshire@outdrs.net</u>
Phone # (optional):

The Committee to Re-Elect Lorin Johnson
Committee Name
Thomas Philippou
Name of Committee Treasurer
PO Box 747 Harvard, MA 01451
Committee Mailing Address
E-mail: <u>tphilippms@AOC.com</u>
Phone # (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	220.00
Line 2: Total receipts this period (page 3, line 11)	550.00
Line 3: Subtotal (line 1 plus line 2)	770.00
Line 4: Total expenditures this period (page 5, line 14)	590.99
Line 5: Ending Balance (line 3 minus line 4)	179.01
Line 6: Total in-kind contributions this period (page 6)	0.00
Line 7: Total (all) outstanding liabilities (page 7)	0.00
Line 8: Name of bank(s) used: <u>Eastern Bank, DCU</u>	

## Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Thomas C. Philippou (Treasurer's signature)

Date: 5/10/2016

## 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: Lorin Johnson (Candidate's signature)

Date: 5-10-2016



## 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)
4/4/2016	Tom Philippou 254 Stow Rd.	25.00	
4/5/2016	Susan Watt 31 Still River Depot Rd.	100.00	
4/6/2016	Ron Ricci 19 East Bare Hill Rd	75.00	
4/7/2016	Betsy McCarthy PO Box 549	50.00	
4/7/2016	Leo Blair 188 Prospect Hill Rd.	200.00	Self-Employed consultant
4/9/2016	Pam Marston 47 Madigan Ln.	100.00	
Line 9: Total Receipts over \$50 (or listed above)		550.00	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)		0.00	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		<b>550.00</b>	

\* 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 Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL 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.)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
3/28/2016	The Harvard Press	PO Box 284 Harvard, MA 01451	Advertisement, Political endorsement	189.00
4/5/2016	The Harvard Press	PO Box 284 Harvard, MA 01451	Advertisement, Candidate endorsement	135.00
4/5/2016	ISS Printing	2 Shaker Rd. D-103 Shirley, MA 01464	Signs	216.00
4/10/2016	Lorin Johnson	20 Still River Depot Rd Stillriver, MA 01467	Reimbursement for stand-out refreshments (Bolton Orchards)	50.99
Line 12: Total Expenditures over \$50 (or listed above)				590.99
Line 13: Total Expenditures \$50 and under* (not listed above)				0.00
Enter on page 1, line 4 → <b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				590.99

\* 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.



## 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.

[illegible]

\* 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
Enter on page 1, line 7 →			<b>Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)</b>	0.00