Form CPF	' M 102: Ca	mpaign Finance Re	PORT
		pal Form OCT 2	8 2013 20
	Office of Campaign	and Political Finance	ek <u>50 minutes P</u> M
Commonwealth of Massachusetts		Survey 1	Cowin der Var Eteotidae Constant Sistion
Fill in Reporting Period dates: Beginning	g Date:	Ending Date: 10/	28/13 City Clerk
Type of Report: (Check one)			- -
Sth day preceding preliminary Sth day prece	eding election 30	day after election year-end	report 🗌 dissolution
JosHVA JOSEPH MORAN Candidate Full Name (if applicable)		Committee Nam	
NOBTH ADAMS LLTY CONNEIL			
Office Sought and District		Name of Committee Th	reasurer
138 CATHEMINE STREET Residential Address		Committee Mailing A	ddress
Telephone Number (optional): 401.298.8761	Tele	phone Number (optional):	
SUMMAJ	RY BALANCE IN	FORMATION:	
Line 1: Ending Balance from prev	ious report	0.00	
Line 2: Total receipts this period (page 3, line 11)	505.00	
Line 3: Subtotal (line 1 plus line 2))	505.00	
Line 4: Total expenditures this per	riod (page 5, line 14)	440,94	
Line 5: Ending Balance (line 3 min	nus line 4)	64.06	
Line 6: Total in-kind contributions	s this period (page 6)	0.00	
Line 7: Total (all) outstanding liab	vilities (page 7)	0.00	
Line 8: Name of bank(s) used:	BANK OF AME	chic A	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedule activity, including all contributions, loans, receipts, expenditures, dis finance activity of all persons acting under the authority or on behalf Signed under the penalties of perjury:	sbursements, in-kind contribu	itions and liabilities for this reporting period a	tement of all campaign finance nd represents the campaign Date: $10/27/13$
FOR CANDIDATE FILINGS ONLY: Affidavit of Ca	andidate: (check 1 box only)		
Candidate with Committee I certify that I have examined this report including attached schu activity, of all persons acting under the authority or on behalf or incurred any liabilities nor made any expenditures on my behalf	f this committee in accordance	ce with the requirements of M.G.L. c. 55. I ha	e statement of all campaign finance we not received any contributions,
Candidate without Committee I certify that I have examined this report including attached sch finance activity, including contributions, loans, receipts, expend campaign finance activity of all persons acting under the author	ditures, disbursements, in-kin	d contributions and liabilities for this reportin	g period and represents the
Signed under the penalties of perjury:		(Candidate's signature)	Date: <u>10/27/13</u>

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)
9/25/13	SUE CHILSON PO BOX 951 NONTH ADAMS, MA	# 100	
9/15/13	JOE MORAN IS BELIMORE AVE NOKTH ADAMS, MA	# 50	
9/20/13	BESSIE MORIN 15 BULTMONE AVE NONTH ADAMS, MA	# 50	
10/7/13	MANGARET MUVLTON 111 PAUSPECT ST NONTH YDAMS, MA	\$t_100	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above) 205.00			
Line 11: TOTAL I	RECEIPTS IN THE PERIOD	505.00	←□ 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.

(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
9/24/13	BERKSHINE EMPORIUM	59 MAIN STREET NORTH ADAMS, MA	CAMPAIAN SIGNS	440.94
				Letter and the second s
	· .			·.
<u></u>	Line 12: Total Expenditures over \$50 (or listed above)			440.94
		Line 13: Total Expenditures \$50	0.00	
Enter on page 1, line $4 \rightarrow$ Line 14: TOTAL EXPENDITURES IN THE PERIOD			440.94	

* 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