Commonwealth CTCHBURG CITY CLERK Q: 51

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

of Massachusetts (*110410	File with: City or Town Clerk or Election Commission
	1, 2014 Ending Date: Dec 31, 2014
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Jeffrey Bean Candidate Full Name (if applicable)	Committee for Exch Jeff Bear Committee Name
Cancillar at Large Office Sought and District	Sarub Bear Name of Committee Treasurer
1495 Pearl Hill Pel Residential Address	1495 Pearl Hill Ven Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALANC	TE INTECOMATION.
SUIVIIVIARI DALAIN	E INFORMATION:
Line 1: Ending Balance from previous report	245.60
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	245.60
Line 4: Total expenditures this period (page 5, lin	ne 14)
Line 5: Ending Balance (line 3 minus line 4)	245.60
Line 6: Total in-kind contributions this period (pa	age 6)
Line 7: Total (all) outstanding liabilities (page 7)	370.821
Line 8: Name of bank(s) used: Cuebst	er First Creat Tum
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the bes 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 authority.	contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be	ox only)
	he 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, ag 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 th finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	ne best of my knowledge and belief, a true and complete statement of all campaign ts, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date:

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
				1
		Line 15: In-Kind Contributions	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 C	ONTRIBUTIONS	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.

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
8/M _{8/11}	JeH Bean	1490 Pers Amora	lan	37084
The state of the s	MEGO CIA LOS APORTA NA SENSITA NA			
\$				
				Annual

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)	
Line 9: Total Rece	ipts over \$50 (or listed above)			
Line 10: Total Rece	eipts \$50 and under* (not listed above)			
Line 11: TOTAL l	RECEIPTS IN THE PERIOD	/0	← Enter on page 1, line 2	

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
	the second control of			
				N
			<i>Y</i>	
	<u>L</u>	L	<u> </u>	<u>L</u>

. [
<u></u>				

				L
		V		
	1			
			L	
. [
	/ / / / / /			
				11.
		Line 12: Total Expenditures over	er \$50 (or listed above)	
		F		
		Line 13: Total Expenditures \$50	and under* (not listed above)	
		,	(t.

^{*} 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