

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

File with:					
City or Toy	u.	Clerk	೧೯	Floctico Commission	

ty or Town Clerk or Election Commission P	lease print or type	all infor	mation, except sign	natures.		
Fill in dates: Morth Reporting Period Beginning 5	Date	2615	Ending_	Months 4	Date 15	2015 <u> </u>
Type of report: (Check one) 8th day preceding preliminary	8th day preceding	g election	🔀 30 day after e	election	·□year-end report	□dissolution
Peter A Croning Full Name of Candidate (if a GD School Combittee Office Sought and Dis 15 Gilson Rd Groto Residential Addres	1	Committee Name Name of Committee Treasurer Committee Mailing Address Tel. No. (optional)				
	Tel. No. (options				a cus 2 vice (= 1.025.00 g
SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, 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 (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used 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 algusture (in ink)					Date	in a constant in the second se
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 f 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 lumize 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)	

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Line 9: T	otal receipts in excess of \$50 (or listed above)		egan yangara ara	MMATRICAL PROPERTY OF THE PROP	
	otal receipts \$50 and under* (not listed above)				
Line 11: T	OTAL 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.

Page 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.

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	Am	ount
	TheTaven	94 Lovers Lane Groton	Meals/Food for Campaign event	120	90
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		Line	12: Expenditures over \$50		
		Line	13: Expenditures \$50 and under		
	Enter on page 1, line 4	Line	14:TOTAL EXPENDITURES		

^{*}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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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
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				Control of the Contro
		Line 15:	In-kind over \$50	
	na di salah sa	Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	

^{*} 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	To Whom Due	Address	Purpose	Amount
Incurred		-		
学训一	Angela Donahue	10 Bistop Way Groton MA	Campaign Signs, holders Bumper steeters	318,79
3/8/15	Marlena Gilbert	45 Arbor Way, Groton	/awn sighs	179,44
		y		
2*************************************			•	
,				
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	498,23

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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