

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachuse	etts	File with: City or Town Clerk or Election Commission
Fill in Re	porting Period dates: Beginning Date: Febr	ruary 1, 2015 Ending Date: May 1, 2015
, ,	Report: (Check one) preceding preliminary	30 day after election year-end report dissolution
Arthur Lor	on Drock	No Committee
Arthur Lor	Candidate Full Name (if applicable)	Committee Name
Selectman		
	Office Sought and District	Name of Committee Treasurer
8 Weymiss	set Road, Groton, MA 01450	
L	Residential Address	Committee Mailing Address
Telephone Nu	imber (optional): (978) 448-2384	Telephone Number (optional):
Г	SUMMARY BALANC	CE INEADMATIAN.
	SUMMARI DALANC	LE INFORMATION:
ž _a	Line 1: Ending Balance from previous report	0
	Eine 2: Total receipts this period (page 3, line 11)	5,764.41
	general control of the control of th	
3 m	Line 3: Subtotal (line 1 plus line 2)	5,764.41
TO WE CLE	Line 4: Total expenditures this period (page 5, line)	ne 14) 5,764.41
	Line 5: Ending Balance (line 3 minus line 4)	0
	Line 6: Total in-kind contributions this period (pa	age 6) 0
	Line 7: Total (all) outstanding liabilities (page 7)	0
	Line 8: Name of bank(s) used: North Middlesex Sa	ivings Bank
I certify that I activity, include finance activity		######################################
		(Treader 3 signature)
Candidat I certify the activity, concurred at Candidat Candidat I certify the finance activity is concurred.	of all persons acting under the authority or on behalf of this committee in acting liabilities nor made any expenditures on my behalf during this reporting the without Committee OR Candidate with independent activity filing so that I have examined this report including attached schedules and it is, to the ctivity, including contributions, loans, receipts, expendituses, disbursements	the best of my knowledge and belief, a true and complete statement of all campaign finance occordance with the requirements of M.G.L. c. 55. I have not received any contributions, g period. **Reparate report** The best of my knowledge and belief, a true and complete statement of all campaign to the light statement of all campa
campaign	finance activity of all persons acting under the authority or on behalf of the	(Candidate's signature) 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.

(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.)

	Name and Residential Address	Occupation & Employer		
Date Received (alphabetical listing required)		Amount	(for contributions of \$200 or more)	
Mar 16, 2015	Arthur Loren Prest 8 Weymisset Road Groton, MA 01450	500	retired - self funded	
Mar 18, 2015	Arthur Loren Prest 8 Weymisset Road Groton, MA 01450	95.38	retired - self funded	
Mar 19, 2015	Arthur Loren Prest 8 Weymisset Road Groton, MA 01450	1,000	retired - self funded	
Apr 13, 2015	Arthur Loren Prest 8 Weymisset Road Groton, MA 01450	995	retired - self funded	
Apr 13, 2015	Arthur Loren Prest 8 Weymisset Road Groton, MA 01450	2,800	retired - self funded	
Apr 27, 2015	Arthur Loren Prest 8 Weymisset Road Groton, MA 01450	374.03	retired - self funded	
		And Andrews Control of		
Line 9: Total Receipts over \$50 (or listed above) 5,764.41				
Line 10: Total Receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD 5,764.41			← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address Date Received (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Line 9: Total Recei	pts over \$50 (or listed above)			
Line 10: Total Rece	ipts \$50 and under* (not listed above)			
	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.)

- The man as some and the second	ditures. Please include your comi To Whom Paid		The second secon	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Mar 16, 2015	Groton Pixel Web Design	95 Main Street Groton, MA 10450	deposit on web page design	500
Mar 18, 2015	IPRINT.com	PO Box 351230 New Braunfels, TX 78135	campaign business cards	95.38
Mar 19, 2015	Stock Video	296 Townsend Road Groton, MA 01450	deposit on campaign video	1,000
Apr 13, 2015	Groton Pixel Web Design	95 Main Street Groton, MA 10450	final payment on web page design	995
Apr 13, 2015	Stock Video	296 Townsend Road Groton, MA 01450	final payment on campaign video	2,800
Apr 27, 2015	Scott Wilson Design	154 Lowell Road Groton, MA 01450	yard signs	374.03
AND THE PROPERTY OF THE PROPER				
		Line 12: Total Expenditures of	over \$50 (or listed above)	5,764.41
		Line 13: Total Expenditures \$.	50 and under* (not listed above)	0
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	5,764.41

^{*} 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount			
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Line 12: Expenditures over \$50 (or listed above)							
Line 13: Expenditures \$50 and under* (not listed above)							
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD				
		If you have itemized expenditures of \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized					

^{*} 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
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TO THE PARTY OF TH				
		Line 15: In-Kind Contributions	over \$50 (or listed above)	0
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	O
	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.

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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
				The state of the s
<u> </u>	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	0