

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance
COMMISSIONERS

(Candidate's signature)

| | or musachasens | File with: 30ly of 1842c1313 or Election Commission | | | | | |
|-----|--|---|--|--|--|--|--|
| | Fill in Reporting Period dates: Beginning Date: | Ending Date VERFOMAS | | | | | |
| | Type of Report: (Check one) | | | | | | |
| | ☐ 8th day preceding preliminary | ction year-end report dissolution | | | | | |
| | Robert Bent | | | | | | |
| | Candidate Full Name (if applicable) | Committee Name | | | | | |
| | 103 61-84 Office Sought and District | Name of Committee Treasurer | | | | | |
| | E-mail: Robert Lent 569 amail. Com E-mail: | Committee Mailing Address | | | | | |
| | Phone # (optional): 857 336 5627 Phone # (optional): | | | | | | |
| | | | | | | | |
| | SUMMARY BALANCE INFORMAT | ION: | | | | | |
| | Line 1: Ending Balance from previous report | | | | | | |
| | Line 2: Total receipts this period (page 3, line 11) | 773:16 | | | | | |
| | Line 3: Subtotal (line 1 plus line 2) | 13.16 | | | | | |
| | Line 4: Total expenditures this period (page 5, line 14) | 73.16 | | | | | |
| | Line 5: Ending Balance (line 3 minus line 4) | 5 | | | | | |
| | Line 6: Total in-kind contributions this period (page 6) | | | | | | |
| | Line 7: Total (all) outstanding liabilities (page 7) | 73.16 | | | | | |
| | Line 8: Name of bank(s) used: NA | | | | | | |
| A | 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 beli activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requir | | | | | | |
| | Signed under the penalties of paringui | asurer's signature) Date: | | | | | |
| F | FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) | | | | | | |
| | Candidate with 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 that are not otherwise disclosed in this report. | | | | | | |
| D. | Candidate without Committee Candidate without Committee Candi | Candidate without 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, including contributions, loans, receipts, expenditures, disbursements, in kind contributions and liabilities for this countributions. | | | | | |
| Sig | Signed under the population of animal Rules of BobA | tidate's signature) Date: 10/36/19 | | | | | |

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

| eport all receipts. Please include your committee name and a page number on each page.) | | | | | | |
|---|--|-----------|--|--|--|--|
| Date Received | Name and Residential Address Received (alphabetical listing required) Amount | | Occupation & Employer (for contributions of \$200 or more) | | | |
| 7/20/9 | Robert Bent 103 Eliot Rd | 2,273.16 | Committee to Elect | | | |
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| | eipts ver \$50 (or listed above) eipts \$50 and under* (not listed above) | 2,273.16. | | | | |
| | RECEIPTS IN THE PERIOD | 2,273,16 | ← Enter on page 1, line 2 | | | |

SCHEDULE A: RECEIPTS (continued)

| Date Paceived | Name and Residential Address Date Received (alphabetical listing required) Amount | | Occupation & Employer (for contributions of \$200 or more) | |
|--------------------|--|-------------------------|--|--|
| Date Received | (aiphaseitest assing 1-1-1-1) | | | |
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| Line 9: Total Reco | cipts over \$50 (or listed above) | | | |
| | eipts \$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.) | | | | | |
|--|-------------------------------------|--------------------------------------|-------------------------------------|------------------|--|
| Date Paid | To Whom Paid (alphabetical listing) | Address | Purpose of Expenditure | Amount | |
| 5)74/19 | Connelly | 1766 illst waburk | Bumper Sticks | 282.02 | |
| 6/4/19 | Connolly | # 176 Coill St | | 192.43 | |
| 6/20/9 | Shirt well T Shirts | 10045 Scoticivele me | TShirts | 55000 | |
| 6/25/19 | Resturant Demai 20'5 | H Mallenst Reser | food | (040.00 | |
| 6/25/19 | Point of Pines you | 28 Rice Ave | Function Hall | 156.0 | |
| 7/2/19 | Home Pepot | 1100 Revere Beach | SIGNSTICKS | 38,76 | |
| 7/2/9 | Home Depot | 1100 Reverbeach | Staglego | 16.48 | |
| 7/12/19 | Home Depot | 160 Revere beach | Staples | 3.47 | |
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| | | Line 12: Total Expenditures or | ver \$50 (or listed above) | | |
| | | Line 13: Total Expenditures \$5 | 0 and under* (not listed above) | | |
| | Enter on page 1, line 4 → | Line 14: TOTAL EXPENDIT | TURES IN THE PERIOD | 2,2016 | |
| * If way have ite | mized expenditures of \$50 and unde | er, include them in line 12. Line 13 | should include only those expenditu | res not itemized | |

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those Page 4 above.

SCHEDULE B: EXPENDITURES (continued)

| SCHEDULE B. EAT ENDITORES (COMMITTEE) | | | | | |
|---|-------------------------------------|--------------------------------|------------------------|--------|--|
| Date Paid | To Whom Paid (alphabetical listing) | Address | Purpose of Expenditure | Amount | |
| Date Fair | | | | | |
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| | | Line 12: Expenditures over \$5 | 0 (or listed above) | | |
| | | Line 13: Expenditures \$50 and | | | |
| | | | | | |
| | Enter on page 1, line 4 → | Line 14: TOTAL EXPENDIT | TURES 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. Page 5

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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| | | 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 CO | ONTRIBUTIONS | |

^{*} 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 |
|---------------|---------------------------------------|-------------------------|------------------------------------|----------|
| 7/2049 | Robert Bent | 163 Eliot Rd | Robert Berty Committee to Elect | 2,273,16 |
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| | Enter on page 1, line $7 \rightarrow$ | Line 18: TOTAL OUTSTAND | ING LIABILITIES (ALL) | 2,273.16 |