

	cipal Form	1 2 C 2017	20
Massachusetts	***	At Jochock Off R	rinutes M
ile with: ity or Town Clerk or Election Commission Please print or type all in	nformation, except sig	natures.	City Clerk
Fill in dates: Reporting Period Beginning Sept. 20	Zear 7 Ending	Month Date	Year 26/7
Type of report: (Check one) ☐8th day preceding preliminary ☐8th day preceding elect	tion □30 day after e	election year-end report	□dissolution
Full Name of Candidate (if applicable)		Committee Name	<u> </u>
Office Sought and District 85 West Main St. North Adams	Name (of Committee Treasurer	× 17.1
Residential Address Tel. No. (optional)	Comn	nittee Mailing Address Tel. No. (0	
SUMMARY BALA Line 1: Ending balance from pre Line 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period Line 5: Ending balance (line 3 minus Line 6: Total in-kind contributions	vious report (page 2, line 11) eriod (page 3, line 1 line 4) this period (page 4	\$ 0 \$ 558.94 \$ 558.94 4) \$ 505.27 \$ 53.67	
Line 7: Total (all) outstanding liabil Line 8: Name of bank(s) used <u>Se</u>	ities (page 4) excessive Ba	s_ enk	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to finance activity, including all contributions, loans, receipts, expenditures, disburs campaign finance activity of all persons acting under the authority or on behalf of Signed under the persons.	sements, in-kind contributions f this committee in accordan	s and liabilities for this reporting perio	d and represents the
Treasurer's signature (in ink)		Date	
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
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 comparison
mance 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 helief a true and complete statement of all campaign
Imance 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:
h l P

Candidate signature (in ink)

10 20 117 Date

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	Paid To Whom Paid Address Purpose of Expenditum (alphabetical listing)		Purpose of Expenditure	e Amount	
9.18.17	Pay Pal			3	2.e
9.18.17	Pay Pal		·	3	2.6
9.26.17	100				59
9.27.17	Pay Pal			l	৩২
10.2017	Beck's Printing			413	31
10.20.17	Beak's Printing			83	94
			·		
	_		Line 12: Expenditures over \$50		
			Expenditures \$50 and under*		
	nter on page 1, line 4		:TOTAL EXPENDITURES	505	27

^{*}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