



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with:
City or Town Clerk or Election Commission

5/7/2012

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Reporting Period - Beginning: 4/13/2012 Ending: 5/4/2012

Type of report: Pre-election

Kenneth Tavares <i>Full Name of Candidate</i>	Committee to elect Ken Tavares <i>Committee Name</i>
Selectman, Plymouth, MA <i>Office Sought/ District</i>	David Buckman <i>Name of Committee Treasurer</i>
7 Winter Street Plymouth, MA 02360 <i>Residential Address</i>	36 Timberlane Plymouth, MA 02360 <i>Committee Address</i>

SUMMARY BALANCE INFORMATION

Ending Balance from previous report:	\$444.55
Total receipts this period:	\$3,769.00
Subtotal:	\$4,213.55
Total expenditures this period:	\$3,744.27
Ending Balance:	\$469.28
Total inkind contributions this period:	\$0.00
Total outstanding liabilities:	\$0.00
Name of bank(s) used:	Bridgewater Credit Union

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, inkind 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 signature (in ink)

Date

5/7/12

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, and 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 and 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, inkind 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:

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.

Date	Name and Residential Address	Amount	Occupation and Employer
4/26/2012	Bartlett, Joan 226 Warren Avenue Plymouth, MA 02360	\$100.00	
4/16/2012	Benezra, Jerry 41 Timberlane Plymouth, MA 02360	\$100.00	
4/26/2012	Burbine, Henry 9 Fuller Way Plymouth, MA 02360	\$100.00	
4/26/2012	Collins, Francis P.O.Box 713 Manomet, MA 02345	\$100.00	
4/25/2012	Cotti, Robert 12 Veronica Road Plymouth, MA 02360	\$200.00	Restauranter
4/26/2012	Elect Mahoney Committee, John 8 Whiting Street Plymouth, MA 02360	\$100.00	
4/16/2012	Flanagan, John 19 Eel River Circle Plymouth, MA 02360	\$100.00	
5/1/2012	Fosdick, Kenneth 18 Driftwood Lane Plymouth, MA 02360	\$100.00	
4/26/2012	Gaynor, Pamela Manter's Point Plymouth, MA 02360	\$100.00	
4/26/2012	Gtorney, Howard 19 Martin Circle Plymouth, MA 02360	\$100.00	

Date	Name and Residential Address	Amount	Occupation and Employer
4/28/2012	MacGregor, Malcolm 168 Jordan Road Plymouth, MA 02360	\$100.00	
4/23/2012	Meltzer, Fay 6 Oar & Line Road Plymouth, MA 02360	\$100.00	
4/26/2012	Moran, John 77 Cliff Street Plymouth, MA 02360	\$100.00	
4/26/2012	Olson, Clive 1038 Bourne Road Plymouth, MA 02360	\$250.00	Manager Olson's Greenhouses
4/26/2012	Quinn, Donald 188 Ellisville Road Plymouth, MA 02360	\$99.00	
4/26/2012	Russell, M.Charlotte 725 Long Pond Road Plymouth, MA 02360	\$200.00	retired
4/19/2012	Stewart, Joyce 53 Rocky Hill Road Plymouth, MA 02360	\$500.00	Philanthropist
4/30/2012	Tavares, Maggi 7 Winter Street Plymouth, MA 02360	\$185.00	
4/17/2012	Tiernan, Ann 270 N. Collier Blvd. Marco Island, FL 34145	\$100.00	
Total Itemized Receipts		\$2,734.00	
Total Unitemized Receipts		\$1,035.00	
Total Receipts		\$3,769.00	

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 over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
5/4/2012	Consolidated Mail Service Reservoir Rd Rockland, MA 02370	\$2,381.51	Bulk Mailing of Cards
4/27/2012	Prospect Hill Co. 12 Field Street Brockton, MA 02301	\$1,362.76	Sign Printing
Total Itemized Expenditures		\$3,744.27	
Total Unitemized Expenditures		\$0.00	
Total Expenditures		\$3,744.27	

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 the liabilities incurred during this reporting period.

Date	To Whom Due	Amount	Purpose
Total Outstanding Liabilities		\$0.00	

Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind 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. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description Occupation/Employer
Total Itemized Inkind Contributions		\$0.00	
Total Unitemized Inkind Contributions		\$0.00	
Total Inkind Contributions		\$0.00	