



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

2012 MAY - 7 PM 1:15

RECEIVED
TOWN CLERK'S OFFICE
PLYMOUTH, MA

File with: City or Town Clerk or Election Commission Please print or type all information, except signatures.

Fill in dates: Reporting Period Beginning 01 01 2012 Ending 05 07 2012

Type of report: (Check one)
 8th day preceding preliminary 18th day preceding election 30 day after election year-end report dissolution

Robert P. Morgan
Full Name of Candidate (if applicable)
select man
Office Sought and District
9 Peter Rd, Plymouth, MA
Residential Address
508-830-0788 02360
Tel. No. (optional)

Committee to Elect Bob Morgan
Committee Name
Mareen Morgan
Name of Committee Treasurer
9 Peter Rd, Plymouth, MA
Committee Mailing Address
508-830-0788 02360
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>10.00</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>2439.48</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>2449.48</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>1186.30</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>1263.18</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>200.00</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>329.88</u>
Line 8: Name of bank(s) used	<u>Eastern Bank, West Plymouth</u>

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 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 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 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.

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)
01/07/12	Eric BSS Norwich CT	48	00	
01/07/12	Joseph Caldarella Westfield, MA	148	00	
01/09/12	Robert McCormack Fenham, MA	200	00	Samuel E McCormack Adisting. Firm
01/18/12	Robert Cunningham Plymouth, MA	40	00	
01/18/12	Chris Maschella 41 Knolls Rd Plymouth, MA	48	48	
01/19/12	Richard Pitch Needham, MA	100	00	
02/08/12	Jack Coleman Peter Rd Plymouth, MA	20	00	
02/15/12	Plymouth Republican Town Committee, Plymouth, MA	250	00	Town Committee
02/29/12	Jack Coleman Peter Rd, Plymouth, MA	20	00	
02/29/12	Pat Lee Jull Pines Rd Plymouth, MA	50	00	
02/29/12	Robert Cunningham Gallagher, MA	40	00	
02/29/12	Eric Dykeman Hedge Rd Plymouth, MA	50	00	
02/29/12	Balmda Brewster 39 Forge Dr Plymouth	50	00	
02/29/12	Paul & Donna Saza Chabot Dr Plymouth, MA	50	00	
02/29/12	Jeff Kemp Fox Hollow Plymouth, MA	50	00	
Line 9: Total receipts in excess of \$50 (or listed above)		1448	00	948
Line 10: Total receipts \$50 and under* (not listed above)				216.48
Line 11: TOTAL RECEIPTS IN THE PERIOD		2499	48	1164.48 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

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
02/29/12	Laurie Curtis 41 Oak Bluff Cir. Plymouth, MA	50.00	
02/29/12	Chris Fava 200 Wintercourse Rd, Plymouth, MA	60.00	Software Engineer RR Donnelly Financial
03/12/12	Andy Brosseau St. Albans, VT	25.00	
03/29/12	Anthony O'Brien Marshfield, MA.	20.00	
03/29/12	Christopher Sheldon 1677 State Rd, Plymouth, MA	30.00	
03/29/12	John Maschella Avalon Way, Plymouth, MA	100.00	
03/29/12	Kristen Fava 200 Wintercourse Rd, Plymouth	100.00	
03/29/12	Garrt Nye School St Sandwich, MA	25.00	
03/26/12	Ann-marie Ross Peter Rd, Plymouth	50.00	
04/03/12	Robert Bielek Kathleen Dr, Plymouth, MA	25.00	
04/06/12	Allen Cotlin Greenview Dr, Plymouth, MA	100.00	
04/10/12	Matt Muraire Gabriel Ln, Plymouth, MA	100.00	
Line 9: Total Receipts over \$50 (or listed above)		725	600
Line 10: Total Receipts \$50 and under* (not listed above)			125
Line 11: TOTAL 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
04/10/12	Tom Abel 152 Edurbs Rd, Winstanton, MA	200. ⁰⁰	Adjuster Apex Claims Service
04/24/12	David Westcott 59 Peter Rd, Plymouth, MA	100. ⁰⁰	
04/24/12	Eric Dikemen Hedge Rd, Plymouth, MA	50. ⁰⁰	
04/25/12	Eled John Mahoney Committee Plymouth, MA.	100. ⁰⁰	
04/25/12	Chris Fava 200 Winterwood, Plymouth, MA	50. ⁰⁰	Software Engineer RR Donnelly Financial
04/25/12	Jeffrey Perry Sandwich, MA	25. ⁰⁰	
04/25/12	Jeffrey Kemp Fox Hollow, Plymouth, MA	25. ⁰⁰	

Line 9: Total Receipts over \$50 (or listed above)

550.⁰⁰ 500

Line 10: Total Receipts \$50 and under* (not listed above)

50.⁰⁰

Line 11: TOTAL 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.

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	Amount	
03/19/12	ZDL solutions	65 Peter Rd Plymouth, MA	Lawn Signs	637	50
03/21/12	Ploverham Press	301 Court St Plymouth, MA	Informational Card & Poster	274	78
03/21/12	Town of Plymouth	11 Linden St	Sign Permit	25	00
03/29/12	Ernie's Restaurant	Court St Plymouth, MA	Food for event	82	67
04/25/12	British Beer Co.	State Rd Plymouth, MA	Food for Event	166	35
Line 12: Expenditures over \$50				1161	30
Line 13: Expenditures \$50 and under*				25	0
Line 14: TOTAL EXPENDITURES				1186	30

Enter on page 1, line 4

*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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
02/29/12	Mike Jones on the rocks Tavern	Court St Plymouth	Food for event	1000.00
02/29/12	John Curtis	99 Presidential Rd Braintree, MA 02184	Upgrade website	100.00
Line 15: In-kind over \$50				200.00
Line 16: In-kind \$50 and under				0
Line 17: Total In-kind				200.00

Enter on page 1, line 6

* 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 Incurred	To Whom Due	Address	Purpose	Amount
4/23	Bob Merser	a Peter Rd Plymouth, MA	credit card payment for Rebo calls	82.18
5/2	Bob Merser	a Peter Rd Plymouth, MA	credit card payment for Rebo calls	64.52
4/30	Powderhorn Press	Court St Plymouth, MA	Thank you notes	71.72
5/1	Powderhorn Press	Court St Plymouth, MA	mailer	111.38
Line 18: OUTSTANDING LIABILITIES (ALL)				329.80

Enter on page 1, line 7