This report is due September 19, 2011 from all candidates if there is a Preliminary Election anywhere in the City.

Preliminary Election anyweight Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign Office of Campaign

of Massachus		·.			File with	: City or Town Clerk or I	Election Commission
Fill in Re	eporting Period dates:	Beginning Date:	Jan 1,	2011	Ending Date:	Sep 9, 2011	
• •	Report: (Check one) y preceding preliminary	8th day preceding elec	etion [] 30 day afte	er election . y	ear-end report	dissolution
Pa-	trick (III) (Candidate Full Name (if	opplicable)			Com	mittee Name	
	Office Sought and	COUNCILO			Name of Co	ommittee Treasurer	
34	HOCK Are. F	tchburg			·	Mailing Address	
Telephone N	fumber (optional): LCH8)3	43-0497		Telephone Nu	nber (optional):		
	-	SUMMARY BA	LANCE	INFORM	IATION:		
	Line 1: Ending Balan	ce from previous rep	ort		Ø		
	Line 2: Total receipts	ine 2: Total receipts this period (page 3, line 11)			Ø		
•	Line 3: Subtotal (line	1 plus line 2)			Ø		_
	Line 4: Total expend	tures this period (pag	e 5, line	14)	A COUNTY	481.02	
	Line 5: Ending Balan	ce (line 3 minus line	4)		4-600	3 481.02	
	Line 6: Total in-kind	contributions this per	iod (pag	e 6)	\$50		
	Line 7: Total (all) ou	tstanding liabilities (p	age 7)		Ø		
÷	Line 8: Name of bank	c(s) used: LOO	Kos	15 (redit	Union	
I certify that activity, inch finance activ	Committee Treasurer: I have examined this report including uding all contributions, loans, receipts ity of all persons acting under the auther the penalties of perjury:	, expenditures, disbursements	, in-kind co	ntributions and	liabilities for this reporti	ng period and represents t L. c. 55.	
FOR CAN	NDIDATE FILINGS ONLY:	Affidavit of Candidate: (c	heck 1 box	only)			
activity, incurred	ate with Committee and no activity that I have examined this report inclu of all persons acting under the author I any liabilities nor made any expendit	ding attached schedules and i ity or on behalf of this comm ures on my behalf during this	t is, to the b ittee in acco reporting p	rdance with the eriod.			
I certify finance	ate without Committee OR Candide that I have examined this report inclu activity, including contributions, loan gn finance activity of all persons acting	ding attached schedules and i s, receipts, expenditures, disb	t is, to the b ursements, i	est of my knowl n-kind contribu	tions and liabilities for th	is reporting period and re	
Signed unde	er the penalties of perjury:	11/1/	-//	==-	(Candidate's signatu	are) Date:	אומגוגע

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)
·			
Line 9: Total Recei	ipts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD	20. Lina 10 abov	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)

Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)	
·				
		-		
			·	
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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	8500 PO			
9/6	Victory Store		Signs	435,60
·				
		Line 12: Total Expenditures over		435.60
*** . 3	Enter on page 1, line 4 →	Line 13: Total Expenditures \$50 Line 14: TOTAL EXPENDITE	Section 1977 and 1977	481.02

^{*} 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	
		A Section of the Control of the Cont			
	,				
Line 12: Expenditures over \$50 (or listed above)					
	•	Line 13: Expenditures \$50 and	under* (not listed above)		
	Enter on page 1, line 4 → mized expenditures of \$50 and under				

^{*} 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
7/11	Eileen O'Halloran	Weston, mA	check	450
				,
	`		·	
		Line 15: In-Kind Contributions	s 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 C	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
				Lupes and the same
11 A				
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	Page 7