



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY CLERK
GLOUCESTER, MA

13 OCT 28 PM 3:15
File with City of Gloucester for Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2013 Ending Date: 10/18/2013

Type of Report: (Check one)

8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Tony M. Gross
Candidate Full Name (if applicable)

School Committee
Office Sought and District

18 Nashua Ave, Gloucester, MA
Residential Address

Telephone Number (optional): 978-281-5593

Committee to Elect Tony Gross
Committee Name

Abbie Lundberg
Name of Committee Treasurer

18 Nashua Ave, Gloucester, MA
Committee Mailing Address

Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$5,105⁰⁰</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$5,105⁰⁰</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>3568⁷⁴</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>1536²⁶</u>
Line 6: Total in-kind contributions this period (page 6)	<u>—</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>—</u>
Line 8: Name of bank(s) used:	<u>Cape Ann Savings Bank</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: Abbie Lundberg (Treasurer's signature) Date: 10/28/2013

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.

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 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: Tony M. Gross (Candidate's signature) Date: 10/28/13

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)
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Committee to Elect Tony Gross
Contributions over \$50

Schedule A: Receipts All contributions were received between 9/15 and 10/18

FIRSTNAME	LASTNAME	ADDRESS1	CITY	STATE	ZIP	Amount	Occupation & Employer
Norma	Andrews	14 Leonard St.	Gloucester	MA	01930	\$300	Retired
John and Jan	Bell	257 East Main St.	Gloucester	MA	01930	\$100	
Jim and Jan	Bordinaro	126 Wheeler St.	Gloucester	MA	01930	\$100	
Ron & Joan	Gilson	16 McEachern Place	Gloucester	MA	01930	\$100	
Anne	Meyer	47 Leonard St.	Gloucester	MA	01930	\$1,000	Artist
Ray & Suzanne	Okamoto	235 Roberts Ave.	Glenside	PA	19038	\$100	
Michael	Patil	21 Woodman St.	Gloucester	MA	01930	\$100	
Ralph & Kathleen	Pino	56 Ye Olde Country Rd.	Gloucester	MA	01930	\$200	Lawyer, Pino & Shea
Pete & Dona	Shea	7 Revere St.	Gloucester	MA	01930	\$100	
Dave & Ginny	Spencer	4 Bridgewater St.	Gloucester	MA	01930	\$200	Chairman of the Board,
Mark	Sullivan	5 Lincoln Ave.	Gloucester	MA	01930	\$100	
Frank	Tedesco	9 Rocky Pasture Rd.	Gloucester	MA	01930	\$100	
Barry & Susan	Weiner	3 A Curlew Ct.	Gloucester	MA	01930	\$100	
Patsy	Whitlock	9 Barberry Heights Rd.	Gloucester	MA	01930	\$100	
Robert and Sue	Xavier	117 Leonard St.	Gloucester	MA	01930	\$500	Retired
TOTAL						\$3,200	

Line 9: Total Receipts over \$50 (or listed above)	3,200 ⁰⁰
Line 10: Total Receipts \$50 and under* (not listed above)	1,905 ⁰⁰
Line 11: TOTAL RECEIPTS IN THE PERIOD	5,105⁰⁰

← 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
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Schedule B: Expenditures Campaign to Elect Tony Gross
Expenditures over \$50

Date	Vendor	Address	Purpose	Amount
28-Sep	Ace Hardware	231 Gloucester Crossing, Gloucester, MA 01930	Thank you cards	\$65.85
21-Sep	Ace Hardware	231 Gloucester Crossing, Gloucester, MA 01930	Thank you cards	\$95.63
11-Sep	Chisholm & Hunt	14A Whittemore St, Gloucester, MA 01930	Printing letters, envelopes & cards	\$427.00
15-Oct	Gloucester Daily Times	36 Whittemore St. Gloucester, MA 01930	Campaign ads	\$1,646.74
11-Sep	Gloucester Graphics	19 Pond Rd Gloucester, MA 01930	Campaign signs	\$564.19
3-Sep	Staples Copy & Print	www.staples.com	Brochures	\$343.69
24-Sep	USPS	Riverdale Station, Gloucester, MA 01930	postage	\$92.00
11-Sep	USPS	Dale Avenue, Gloucester, MA 01930	postage	\$276.00
				\$3,511.10

Line 12: Total Expenditures over \$50 (or listed above)	3511.10
Line 13: Total Expenditures \$50 and under* (not listed above)	57.64
Line 14: TOTAL EXPENDITURES IN THE PERIOD	3568.74

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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
* 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.				
Enter on page 1, line 6 →				
Line 15: In-Kind Contributions over \$50 (or listed above)				
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				

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
Enter on page 1, line 7 →				
Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				