



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

CITY CLERK
GLOUCESTER, MA
Office of Campaign and Political Finance

2021 OCT 25 PM 2:42

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 1, 2021 Ending Date: October 15, 2021

Type of Report: (Check one)

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

Robin Hubbard
Candidate Full Name (if applicable)
Councilor At Large City
Office Sought and District
S Roberts Court Gloucester MA
Residential Address
E-mail: robin@robinhubbard.com
Phone # (optional): 978-290-2462

Committee to Elect Robin Hubbard
Committee Name
Nicole Coles
Name of Committee Treasurer
46 Leverett Street Gloucester
Committee Mailing Address MA 01930
E-mail: ncoles33@comcast.net
Phone # (optional): 978-471-8362

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>3,750.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>3,750.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>2,204.79</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>1,545.21</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>1,200.00</u>
Line 8: Name of bank(s) used:	<u>TD BANK 2 Harbor Loop</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: Nicole Coles (Treasurer's signature) Date: 10/25/2021

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 that are not otherwise disclosed in this report.

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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Robin Hubbard (Candidate's signature) Date: 10/25/2021

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)
9/14/2021	Lara Bruni 5 Roberts Court Gloucester, MA	300.00	Nurse Laney
8/27/2021	Nicole Coles 46 Leverett St Gloucester, MA	100.00	Senior Accountant self employed
10/3/2021	Diane Eason	100.00	
10/12/2021	Larry Gwinn	100.00	
9/9/2021	Donald King 138 Mt Pleasant Ave Gloucester MA	500.00	Railways Manager Railways Gloucester Marine Corp
10/8/2021	Vincent Montillaro 3 Tidal Cove Way Gloucester, MA	200.00	owner Montillaro Lobster
8/30/2021	Patti Page 3 Tidal Cove Way Gloucester MA	250.00	retired
10/3/2021	Patti Page 3 Tidal Cove Way Gloucester MA	100.00	
10/9/2021	Brian Pollard	50.00	
9/14/2021	Robin Hubbard Rearty 5 Robert Court Gloucester, MA	1,200.00	self employed Financial Professional loan
9/25/2021	Jeffrey Scatterday 12 Railroad Ave Rockport MA	350.00	Naval Officer U.S. NAVY
10/11/2021	Anita Scatterday 12 Railroad Ave Rockport MA	300.00	retired
Line 9: Total Receipts over \$50 (or listed above)		3,550.00	
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		3,550.00	plus page 3 (*) ← 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)
8/27/2021	Richard Toteri 58 Forest Ave Essex, MA 01929	100. ⁰⁰	Self employed
8/27/2021	William Watkins 11 Serenity Woods Pl The Woodlands, TX 77382	100. ⁰⁰	retired

Line 9: Total Receipts over \$50 (or listed above)	200. ⁰⁰
Line 10: Total Receipts \$50 and under* (not listed above)	0
Line 11: TOTAL RECEIPTS IN THE PERIOD	3750.⁰⁰

← 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
9/17/2021	Boyds direct	100 Maple Street Unit 2 Stoneham MA	signs	1,000. ⁰⁰
9/21/2021	Boyds direct	100 Maple Street Unit 2 Stoneham MA	signs	1,125. ⁰⁰
9/20/21	Godaddy.com	Sunnyvale, CA	website	79. ⁶⁶

Line 12: Total Expenditures over \$50 (or listed above) 2,204.66

Paypal verification Line 13: Total Expenditures \$50 and under* (not listed above) 0.13¢

Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD** 2,204.79

* 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

Line 12: Expenditures over \$50 (or listed above)	/
Line 13: Expenditures \$50 and under* (not listed above)	/
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD	/

* 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

Line 15: In-Kind Contributions over \$50 (or listed above)	0
Line 16: In-Kind Contributions \$50 & under (not listed above)	0
Line 17: TOTAL IN-KIND CONTRIBUTIONS	0

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
9/14/2021	Robin Hubbard	5 Roberts Court Gloucester MA	loan	\$1,200.00

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

1,200.00