



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY CLERK  
GLOUCESTER, MA

16 JAN -8 AM 9:35

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/17/15 Ending Date: 10/31/15

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

James W. O'Hara Jr  
Candidate Full Name (if applicable)  
Commissioner at Large Gloucester  
Office Sought and District  
55 Lexington Ave Gloucester  
Residential Address  
Telephone Number (optional): 978-979-7533

Committee to elect James O'Hara  
Committee Name  
Drew White  
Name of Committee Treasurer  
55 Lexington Ave Gloucester  
Committee Mailing Address  
Telephone Number (optional): 978-979-7533

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>200.00</u>
Line 2: Total receipts this period (page 2, line 11)	<u>3048.78</u>
Line 3: Subtotal (line 1 plus line 2)	<u>3248.78</u>
Line 4: Total expenditures this period (page 3, line 14)	<u>2748.78</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>500.00</u>
Line 6: Total in-kind contributions this period (page 4)	<u>500.00</u>
Line 7: Total (all) outstanding liabilities (page 4)	<u>3833.78</u>
Line 8: Name of bank(s) used:	<u>CITIZENS 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: [Signature] (Treasurer's signature) Date: 12/30/15

**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: [Signature] (Candidate's signature) Date: 12/30/15

## 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)
10/28/15	James W. O'Hara Jr 55 Lexington Ave Glou MA	2083.78	self employed
10/15/15	James W. O'Hara Jr 55 Lexington Ave Glou MA	540.00	self employed
11/1/15	Michael Williams Jr. Carollee Williams 58 Harrison Ave Glou MA	50.00	
12/10/15	Amanda Kesterson Kevin Westerson 293 Washington St Glou MA	25.00	
12/10/15	Harley J. Allison Ian Allison 106 Centennial Ave Glou MA	25.00	
12/11/15	Joan M. Ciofano Joseph A. Ciofano 28 High Popple Rd Glou MA	25.00	
12/10/15	Giuseppe Forcasciella at large 16 Gould Ct Glou MA	25.00	
12/10/15	Robert W. Spumelli Jr Annette W. Spumelli 4 St. Roberts Lane Glou MA	25.00	
11/1/15	Michael Wilson Pocriacora J Wilson 12 Village Rd Glou	200.00	Retired
12/10/15	Debra A. Loughlin Robert K. Whitehouse Jr 2 Blueberry Lane Glou MA	50.00	

Line 9: Total Receipts over \$50 (or listed above) 3048.78

Line 10: Total Receipts \$50 and under\* (not listed above) 0100

Line 11: TOTAL RECEIPTS IN THE PERIOD 3048.78

← 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 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
12/10/15	Levny Linguata	4 Reef Knot Way Dorchester MA	Food/room	500.00
<p>* 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.</p> <p style="text-align: right;">Enter on page 1, line 6 →</p>				<p><b>Line 15: In-Kind Contributions over \$50 (or listed above)</b> <span style="float: right;">500.00</span></p> <p><b>Line 16: In-Kind Contributions \$50 &amp; under (not listed above)</b> <span style="float: right;">0.00</span></p> <p><b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b> <span style="float: right;">500.00</span></p>

## 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
10/28/15	James W. O'Hara Jr	55 Lexington Ave Dorchester MA	Lesson	2083.78
10/15/15	" " " "	" " " "	"	540.00
8/11/15	" " " "	" " " "	"	335.00
8/26/15	" " " "	" " " "	"	875.00
<p style="text-align: right;">Enter on page 1, line 7 →</p>				<p><b>Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)</b> <span style="float: right;">3833.78</span></p>