



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance

Municipal Form

Office of Campaign and Political Finance

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OCT 29 2019

ELECTION COMMISSION

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/19 Ending Date: 12/15/19

Type of Report: (Check one)

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

Cathleen DeSimone
Candidate Full Name (if applicable)

City Council At-Large Attleboro
Office Sought and District

8 Northfield Road Attleboro MA
Residential Address

E-mail: ATTYDESIMONE@YAHOO.COM

Phone # (optional): 508 207 3480

— NONE —
Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>—</u>
Line 2: Total receipts this period (page 3, line 11)	<u>962.31</u>
Line 3: Subtotal (line 1 plus line 2)	<u>962.31</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>962.31</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>962.31</u>
Line 6: Total in-kind contributions this period (page 6)	<u>—</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>962.31</u>
Line 8: Name of bank(s) used:	<u>MA</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) Date: _____

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: _____ (Candidate's signature) Date: 10-29-19

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
5/31/19	SIGNS ON THE CREOP	115 25A STONEHOLLOW DR. STE. 100 AUSTIN TX 78758	LAWN SIGNS	363.80
6/20/19	PLEASANT PRINTING	163 PLEASANT ST. ATTLEBORO MA	PALM CARDS	116.88
10/28/19	PLEASANT STREET PRINTING	163 PLEASANT ST. ATTLEBORO MA	POST CARDS	481.63
Line 12: Total Expenditures over \$50 (or listed above)				962.31
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				962.31

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 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
	NONE			
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				

* 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
5/31/19	Cathleen DeSina	8 Northfield Road Athol MA	YARD SIGNS	363.80
6/20/19	Cathleen DeSina	8 Northfield Road Athol MA	PALM CARDS	116.88
10/28/19	Cathleen DeSina	8 Northfield Road Athol MA	POSTCARDS	481.63
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	962.31