



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

RECEIVED Office of Campaign and Political Finance

15 OCT 30 AM 11:22 JAW 2015

10/16/15 *JWC*

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: **AMESBURY CITY CLERK** Beginning Date: August 2015 Ending Date: October 2015

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

Donna McClure
Candidate Full Name (if applicable)

Councilor at Large
Office Sought and District

24 Paige Farm Rd
Residential Address

Telephone Number (optional): 617.512.4400

Committee to elect Donna McClure
Committee Name

David McClure
Name of Committee Treasurer

24 Paige Farm Rd
Committee Mailing Address

Telephone Number (optional): 617.645.2291

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	\$288.25
Line 2: Total receipts this period (page 3, line 11)	\$989.09
Line 3: Subtotal (line 1 plus line 2)	\$1277.34
Line 4: Total expenditures this period (page 5, line 14)	1277.30
Line 5: Ending Balance (line 3 minus line 4)	\$.04
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Citizens Bank

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: 10/26/15

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the 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 OR Candidate with independent activity filing separate report
 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: 10/26/15

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)
8/2015	Kristin McClure 6418 Ira Ingram Dr Austin, TX	\$200	HR Director Parseley Energy
9/2015	Graham Fitz 33 Timberwick Dr Clifton Park, NY	\$200	Physician St. Peter's Hospital
9/2015	Dave Haraske 8 Moody St. Amesbury, MA	\$50	
9/2015	Greg Jardis 24 High St. Amesbury, MA	\$100	
9/2015	Bob Evans River St Amesbury, MA	\$25	
10/2015	Mike Buetow Cabot Court Amesbury, MA	\$100	
10/2015	David McClure 24 Paige Farm Rd Amesbury, MA	\$314.09	Sales Gecko Alliance, Inc. 450 des Canetons Quebec City
Line 9: Total Receipts over \$50 (or listed above)		\$989.09	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$989.09	← 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.

