



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF NEW BEDFORD OFFICE  
100 STATE ST. 2ND FL.

File with: City or Town Clerk or Election Commission. Please print or type all information, except signature.

Fill in dates: Reporting Period Beginning January 1, 2012 Ending December 31, 2012

Type of report: (Check one)  
 30 day preceding preliminary  18th day preceding election  30 day after election  Year-end report  Dissolution

<u>SUSAN Charlotte Zepher</u> Full Name of Candidate (if applicable)	<u>Committee to Elect Susan Charlotte Zepher</u> Committee Name
<u>Councilor at Large</u> Office Sought and District	<u>EDUARDO ZEPHER</u> Name of Committee Treasurer
<u>437 WEST ST. LYNNFIELD</u> Residential Address	<u>437 WEST ST LYNNFIELD, MASS 01903</u> Committee Mailing Address
<u>978-265-2585</u> Tel. No. (optional)	<u>978-265-2585</u> Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report	\$ <u>2462.71</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>250.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>2712.71</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>1585.49</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>1127.22</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>0.00</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>5000.00</u>
Line 8: Name of bank(s) used	<u>LETTERMAN CREDIT UNION</u>

**Affidavit of Committee Treasurer:**  
I certify that I have examined this report including attached schedules and files, 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: 1-14-13  
Treasurer's signature (in ink): [Signature] Date:

**FOR CANDIDATE FININGS ONLY: (CANDIDATE MUST SIGN BELOW)**

**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 files, 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 used my contributions, incurred any liabilities or 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 files, 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: 1/15/13  
Candidate signature (in ink): [Signature] Date:



**Form CPF M 102-0: Campaign Finance Report  
Municipal Form**  
Office of Campaign and Political Finance

OFFICE OF CAMPAIGN AND POLITICAL FINANCE  
100 STATE STREET, SUITE 100  
BOSTON, MA 02109  
TEL: 617-725-6000

City or Town of: Leominster

Please print or type all information, except signatures.

Fill in dates:	Month	Day	Year	Month	Day	Year
Reporting Period Beginning	<u>1/1/12</u>			Ending	<u>12/31/12</u>	

Type of Report: (Check One)

8th day preceding preliminary/primary
  8th day preceding election
  30th day following election (Town or Special)
  20th day of January (Year-End Report)

Pursuant to M.G.L., Chapter 55:

- I certify that I am a candidate for or hold Municipal Office.
- I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
- I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
12-13	<u>William Blomquist</u> WILLIAM BLONQUIST	<u>66 Orchard St.</u>	<u>school committee at-large</u>





Commonwealth  
of Massachusetts

### Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
OFFICE OF CAMPAIGN AND POLITICAL FINANCE  
157 JAN 17 6 58 PM

City or Town of: MASSACHUSETTS

Please print or type all information, except signatures.

Fill in dates.	Month	Day	Year	Month	Day	Year
Reporting Period Beginning	January	1	2012	Ending	December	31 2012

Type of Report (Check One)

8th day preceding preliminary/primary    
  8th day preceding election    
  30th day following election (Town or Special)    
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DATE	I. SIGNATURE <small>Signed under the penalties of perjury.</small>	II. RESIDENTIAL ADDRESS <small>(Street and Number)</small>	III. OFFICE SOUGHT
1/1/12	<i>[Signature]</i>	<i>[Address]</i>	<i>[Office Sought]</i>

