

# Form CPF M 102: Campaign Finance-Report

Municipal Form
Office of Campaign and Political Finance

MAY 0 1 2015

TOWN CLERK
LANCASTER, MA 01523
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date:	Ending Date: 04/21/15
Type of Report: (Check one)	
☐ 8th day preceding preliminary	n 30 day after election year-end report dissolution
JOHN C. SCHUMACHER-HARDY	
Candidate Full Name (if applicable)	Committee Name
LIBRARY TRUSTEE	
Office Sought and District	Name of Committee Treasurer
292 BOLTON ROAD	
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALA	NCE INFORMATION:
Line 1: Ending Balance from previous report	D
Line 2: Total receipts this period (page 3, line	11)
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5,	, line 14)
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period	(page 6)
Line 7: Total (all) outstanding liabilities (page	:7)
Line 8: Name of bank(s) used:	
activity, including all contributions, loans, receipts, expenditures, disbursements, in-k finance activity of all persons acting under the authority or on behalf of this committee Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 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	to the best of my knowledge and belief, a true and complete statement of all campaign finance in accordance with the requirements of M.G.L. c. 55.  Date: // May 2015  Date: // May 2015
Candidate without Committee OR Candidate with independent activity filing I certify that I have examined this report including attached schedules and it is, to	ng separate report to the best of my knowledge and belief, a true and complete statement of all campaign ments, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date:

#### 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 sequent. 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)
	18		
Line 9: Total Rece	ipts over \$50 (or listed above)		
Line 10: Total Reco	cipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<sup>\*</sup> 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)		
			,		
ine 9: Total Receip	ots over \$50 (or listed above)				
ine 10: Total Recei	pts \$50 and under* (not listed above)				
ine 11: TOTAL R	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2		

<sup>\*</sup> 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.)

D 4 D 11	To Whom Paid	Address	Dumass of Evnandituus	A	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
			L	L	
- 1					
- 1					
		Line 12: Total Expenditures or	ver \$50 (or listed above)		
		- I I I I I I I I I I I I I I I I I I I			
		Line 13: Total Expenditures \$50 and under* (not listed above)			
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	1	

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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## SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
1				
				L
	200			
				-
	-			
		Line 12: Expenditures over	\$50 (or listed above)	
		Line 13: Expenditures \$50 ar	nd under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPEND	DITURES IN THE PERIOD	15

<sup>\*</sup> 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)		
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line $6 \rightarrow$	nter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

<sup>\*</sup> 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.

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## 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
		]		][
	-			
	****			
	Enter on second disc 2	→ Line 18: TOTAL OUTSTA	NDING HABII ITIES (ALL)	

		*