Campaign Finance Tracking Form for Local Election Officials

Call OCPF with campaign finance questions at 617-979-8300

Candidate or Committee Karen Foster Year 2019

Report: ___ Pre-Preliminary ___ Pre-Election ___ 30-Day ✓ Year-End

Organization / Providing Materials / Notification *

_____ Organizational form provided to candidate or committee (M101, M101BQ, M101PC)

_____ Campaign finance report form provided to candidate or committee (M102)

_____ Summary of the campaign finance law provided (OCPF guide booklet)

_____ Filing notice (includes reporting dates, due dates and language concerning late fines)

___ Pre-Preliminary ___ Pre-Election ___ 30-Day ___ Year-end

**All forms, guides and notices can be delivered by e-mail*

Inspecting Reports

The campaign finance law requires local election officials to "inspect" M102 and M102-0 campaign finance reports within 30 days of a due date.

✓ Correct dates for the relevant reporting period

✓ Signatures

✓ Positive ending balance

_____ If the **M102-0** form is filed, the candidate does not have a committees and has not received any contributions, made any expenditures or incurred any obligations during the reporting period, and does not have a campaign fund in existence.

Contributions (Monetary receipts and in-kind contributions)

✓ **Names and Addresses** for contributions of more than $50

✓ **Occupation and Employer** for contributions of $200 or more

✓ No contributions from corporations, business partnerships, LLCs or LLPs

✓ No contributions from individuals for more than $1,000 (see OCPF's limits chart for other limits)

Expenditures

✓ Vendor Names and Addresses for expenditures of more than $50

✓ Purpose information is disclosed

N/A Reimbursements form (R-1s) filed for reimbursements

Date of Inspection JUL 17 2020

Pamela L. Bowers

Commonwealth of Massachusetts

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

RECEIVED
JAN 22 2020
NORTHAMPTON, MA 01060

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: October 19, 2019 Ending Date: December 31, 2019

Type of Report: (Check one)

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

Karen Foster
Candidate Full Name (if applicable)

City Council, Ward 2
Office Sought and District

155 Grove St., Northampton, MA 01060
Residential Address

E-mail: karenfosterward2@gmail.com

Phone # (optional):

Committee to Elect Karen Foster
Committee Name

Susan Tracy
Name of Committee Treasurer

155 Grove St., Northampton, MA 01060
Committee Mailing Address

E-mail: karenfosterward2@gmail.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	434.51
Line 2: Total receipts this period (page 3, line 11)	75
Line 3: Subtotal (line 1 plus line 2)	509.51
Line 4: Total expenditures this period (page 5, line 14)	429.97
Line 5: Ending Balance (line 3 minus line 4)	79.54
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	99.9
Line 8: Name of bank(s) used:	Florence 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: _____ (Treasurer's signature) Date: 1/20/20

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: 1/20/20

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)
Oct 28, 2019	Jonathan Wright 91 Olander Drive Northampton, MA 01060	75	

Line 9: Total Receipts over $50 (or listed above)	75	
Line 10: Total Receipts $50 and under* (not listed above)	0	
Line 11: TOTAL RECEIPTS IN THE PERIOD	75	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)

Line 9: Total Receipts over $50 (or listed above)		
Line 10: Total Receipts $50 and under* (not listed above)		
Line 11: TOTAL RECEIPTS IN THE PERIOD		← 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 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
Dec 30, 2019	Campaigns That Win	559 Main St. Sturbridge, MA 01566	Postcard Mailing	425

Line 12: Total Expenditures over $50 (or listed above)	425
Line 13: Total Expenditures $50 and under* (not listed above)	4.97
Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD**	429.97

* 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)	
Line 14: TOTAL EXPENDITURES IN THE PERIOD	

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 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)	
Line 17: TOTAL IN-KIND CONTRIBUTIONS	

Enter on page 1, line 6 →

* 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
March 2	Karen Foster	155 Grove St. Northampton, MA 01060	Reimbursement for website hosting (BlueHost)	9.99
April 2	Karen Foster	155 Grove St. Northampton, MA 01060	Reimbursement for website hosting (BlueHost)	9.99
May 2	Karen Foster	155 Grove St. Northampton, MA 01060	Reimbursement for website hosting (BlueHost)	9.99
June 2	Karen Foster	155 Grove St. Northampton, MA 01060	Reimbursement for website hosting (BlueHost)	9.99
July 2	Karen Foster	155 Grove St. Northampton, MA 01060	Reimbursement for website hosting (BlueHost)	9.99
August 2	Karen Foster	155 Grove St. Northampton, MA 01060	Reimbursement for website hosting (BlueHost)	9.99
September 2	Karen Foster	155 Grove St. Northampton, MA 01060	Reimbursement for website hosting (BlueHost)	9.99
October 2	Karen Foster	155 Grove St. Northampton, MA 01060	Reimbursement for website hosting (BlueHost)	9.99
November 2	Karen Foster	155 Grove St. Northampton, MA 01060	Reimbursement for website hosting (BlueHost)	9.99
December 2	Karen Foster	155 Grove St. Northampton, MA 01060	Reimbursement for website hosting (BlueHost)	9.99

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)** 99.9