

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

or massacinusens	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: April	ril 29, 2017 Ending Date: June 8, 2017
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	☑ 30 day after election ☐ year-end report ☐ dissolution
Emmanuel J. Dockter	
Candidate Full Name (if applicable) Board of Selectmen, Hanover	Committee Name
Office Sought and District	Name of Committee Treasurer
27 Stone Meadow Lane Hanover, MA 02339	Name of Committee Treasurer
Residential Address	Committee Mailing Address
E-mail:	E-mail:
Phone # (optional):	Phone # (optional):
SUMMADV DAT AN	CE INFORMATION:
. SOMMAKI BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11	1) 789.74
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, lin	ine 14) 789.74
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (pa	page 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: (None)	
Affidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best	at of my knowledge and heli for the second hel
activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind inance activity of all persons acting under the authority or on behalf of this committee in	contributions and liabilities for this reporting period and represents the compaign
Signed under the penalties of perjury:	(Treasurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	ox 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 activity, of all persons acting under the authority or on behalf of this committee in ac incurred any liabilities nor made any expenditures on my behalf during this reporting	he best of my knowledge and belief, a true and complete statement of all campaign finance ccordance with the requirements of M.G.L. c. 55. I have not received any contributions, g period.
Candidate without Committee OR Candidate with independent activity filing se I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this	e best of my knowledge and belief, a true and complete statement of all campaign
tigned under the penalties of perjury:	(Candidate's signature) Date: Jun 8, 2017

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.)

D-4- D ' '	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
4/29/17-6/8/17	Emmanuel Dockter, 27 Stone Meadow Lane, Hanover	789.74	Attorney, Baum & Dockter LLP
ine 9: Total Receip	ots over \$50 (or listed above)	789.74	
ine 10: Total Recei	pts \$50 and under* (not listed above)	0	
	ECEIPTS IN THE PERIOD	789.74	← 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)

Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)
	·		
		-	
Line 9: Total Receipt	ts over \$50 (or listed above)	0	
	ets \$50 and under* (not listed above)	0	
	CCEIPTS IN THE PERIOD		
			← Enter on page 1, line 2 d include only those receipts not itemized above

^{*} 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.)

report all expen		nittee name and a page number or	n each page.)	
Date Paid	To Whom Paid	A 43	D CE 124	
Date Faid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
May 6, 2017	Dunkin Donuts	2117 Washington St., Hanover	Coffee / Donuts	256.49
May 7, 2017	KT Design	992 Main Street, Hanover	Printing	415.25
Apr 29, 2017	USPS	39 Webster Street, Rockland	Postage	68
May 7, 2017	Zach Thomson	992 Main Street, Hanover	Sign Collection	50
		Line 12: Total Expenditures ove	er \$50 (or listed above)	789.74
Line 13: Total Expenditures \$50 and under* (not listed above)			0	
: IC l		Line 14: TOTAL EXPENDITU	JRES IN THE PERIOD	789.74

^{*} 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)

To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
			1		
		Line 12: Expenditures over \$50	(or listed shave)		
		Diffe 12. Expenditures over \$50	(or instear above)	0	
		Line 13: Expenditures \$50 and u	under* (not listed above)	0	
	T	Line 14. TOTAL EXPERIENCE	LIDEO IN THE PROPERTY		
		Line 14: TOTAL EXPENDIT	ORES IN THE PERIOD could include only those expenditures	0	

^{*} 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 → 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.

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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 page 1, line 7 →	Line 18: TOTAL OUTSTAND	OING LIABILITIES (ALL)	0