



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
WORCESTER CITY CLERK

2012 JAN 20 PM 4:30

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10-22-11 Ending Date: 12-31-11

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

TODD MARK SALMONSEN
Candidate Full Name (if applicable)

School Committee
Office Sought and District

18 Columbus St 01603
Residential Address

Telephone Number (optional): _____

COMMITTEE TO ELECT TODD SALMONSEN
Committee Name

Jennifer Salmonsen
Name of Committee Treasurer

18 Columbus St WORC 01603
Committee Mailing Address

Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>-18.82</u>
Line 2: Total receipts this period (page 3, line 11)	<u>667.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>648.18</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>647.69</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>.49</u>
Line 6: Total in-kind contributions this period (page 6)	<u>290.00</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>-</u>
Line 8: Name of bank(s) used:	<u>Commerce Bank</u>

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: Jennifer Salmonsen (Treasurer's signature) Date: 1/18/12

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: 1-16-12

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)
10-28-11 10-28-11	TODD SALMONSON 18 Columbus ST WORE MA	500.00	West Bayston Public Schools School Counselor
10-28-11	William Gibbs 95 Holden ST Shrewsbury, MA	100.00	
10-28-11	TODD SALMONSON 18 Columbus ST WORE MA	500	West Bayston Public School School Counselor
Line 9: Total Receipts over \$50 (or listed above)		600.00	
Line 10: Total Receipts \$50 and under* (not listed above)		67.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		667.00	← 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.



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED WORCESTER CITY CLERK
2011 OCT 31 PM 11:14

RECEIVED WORCESTER CITY
2011 OCT 31 PM

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:	Month	Date	Year	Month	Date	Year
Reporting Period Beginning	9	3	11	Ending	10	21

Type of report: (Check one)

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

TODD MARK SALMONSEN
Full Name of Candidate (if applicable)

School Committee

Office Sought and District 01603

18 Columbus ST WORC MA
Residential Address

Tel. No. (optional)

Committee To Elect Todd Salmonsen
Committee Name

Jennifer Salmonsen
Name of Committee Treasurer

18 Columbus ST WORC MA 01603
Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ -96.64
Line 2: Total receipts this period (page 2, line 11)	\$ 1000.00
Line 3: Subtotal (line 1 plus line 2)	\$ 903.36
Line 4: Total expenditures this period (page 3, line 14)	\$ 922.18
Line 5: Ending balance (line 3 minus line 4)	\$ -18.82
Line 6: Total in-kind contributions this period (page 4)	\$ _____
Line 7: Total (all) outstanding liabilities (page 4)	\$ _____
Line 8: Name of bank(s) used	<u>Commerce Bank</u>

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:

Jennifer Salmonsen
Treasurer's signature (in ink)

10/23/11
Date

FOR CANDIDATE FILINGS 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 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 signature (in ink)

10-24-11
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 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.

This page may be copied 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)
10-1	Geop German 108 Grove St Worce 01605	100	
9-5	Walter McGovern 46 Cobblestone Worce 01606	50	
9-14	Stephen Pitcher 24 Westwood Worce 01609	100	
10-7	Richard Rafferty 9 Foxwood Ln Northborough MA	500	Lawyer; Edon, Rafferty Tolman & Erlich
10-1	Michael Succi 98 Blueberry Ln Concord, MA 01742	100	
Line 9: Total receipts in excess of \$50 (or listed above)	850		
Line 10: Total receipts \$50 and under* (not listed above)	150		
Line 11: TOTAL RECEIPTS IN THE PERIOD	1,000	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.

This page may be copied 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	
10-10	CAMBRIDGE PRINTING	56 CROFTON ST CAMBRIDGE MA	LAWN SIGNS	203	47
10-13	CAMBRIDGE PRINTING	56 CROFTON ST CAMBRIDGE MA	LAWN SIGNS	106	25
9-11	PLYWOOD PLUS	600 PARK AVE WORE MA	LARGE SIGN MATERIAL	109	76
10-20	WTAB / CLEAR CHANNEL	ASSEMBLY RD PAXTON, MA	RADIO ACD	167	00
Line 12: Expenditures over \$50				586	48
Line 13: Expenditures \$50 and under*				335	70
Line 14: TOTAL EXPENDITURES				922	18

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

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



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

2011 SEP 12 PM 3:35

File with:
 City or Town Clerk or Election Commission

WORCESTER, MA

Please print or type all information, except signatures.

Fill in dates:
 Reporting Period Beginning 7 - 1 - 11 Ending 9 - 2 - 11

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

TODD MARK SALMONSEN
 Full Name of Candidate (if applicable)
School Committee
 Office Sought and District WORC, MA
18 Columbus ST 01603
 Residential Address
 Tel. No. (optional)

Committee To Elect Todd Salmonsen
 Committee Name
Jennifer Salmonsen
 Name of Committee Treasurer
18 Columbus ST WORC MA 01603
 Committee Mailing Address
 Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u> -</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>1470</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>1470</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>1566.64</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>-96.64</u>

Line 6: Total in-kind contributions this period (page 4)	\$ <u> -</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u> -</u>
Line 8: Name of bank(s) used	<u>Commerce Bank</u>

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:
Jennifer Salmonsen
 Treasurer's signature (in ink) 9/11/11
Date

FOR CANDIDATE FILINGS 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 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 signature (in ink) 9-12-11
Date

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.

This page may be copied 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	
8-23	Bentniks	433 Park Ave	Event	300	00
8-4	CAMBRIDGE OFFSET PRINTING	56 CREIGHTON ST CAMBRIDGE MA	LAWN SIGNS	390.	81
7-20	CREATIVE PRINT	803 R LANCASTER ST LEMINSTER MA	PENS	353	35
7-29	Embold Me	567 Southbridge St Auburn MA	T-SHIRT	198	56
7-26	UNITED STATES POST OFFICE	WORCESTER	STAMPS	116	00
Line 12: Expenditures over \$50				1358	72
Line 13: Expenditures \$50 and under*				207	92
Line 14: TOTAL EXPENDITURES				1566	64

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

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