Commonwealth of Massachusetts

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

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning JAN (Month) 1 (Date) 2010 (Year) Ending MAY (Month) 29 (Date) 2010 (Year)

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

MICHAEL P. MANNING
Full Name of Candidate (if applicable)
SELECTMAN NAHANT
Office Sought and District
12 FENNO WAY
Residential Address
NAHANT MA 01908
781 596 2615 **Tel. No. (optional)**

← SAME
Committee Name

Name of Committee Treasurer

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	$ 0
Line 2: Total receipts this period (page 2, line 11)	$ 405.00
Line 3: Subtotal (line 1 plus line 2)	$
Line 4: Total expenditures this period (page 3, line 14)	$ 405.00
Line 5: Ending balance (line 3 minus line 4)	$ 0
Line 6: Total in-kind contributions this period (page 4)	$ 0
Line 7: Total (all) outstanding liabilities (page 4)	$ 0
Line 8: Name of bank(s) used BANK OF AMERICA	

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:

Michael P. Manning — 29 MAY 2010
Treasurer's signature (in ink) — 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:

Michael P. Manning — 29 MAY 2010
Candidate signature (in ink) — 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)
JAN 1 2010	MICHAEL P. MANNING	405	00	ENGINEER NORTHEASTERN UNIV.
Line 9: Total receipts in excess of $50 (or listed above)		405	00	
Line 10: Total receipts $50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD		405	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 M101 : STATEMENT OF ORGANIZATION
CANDIDATE'S COMMITTEE
MUNICIPAL FORM
Office of Campaign and Political Finance

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

1. Committee Name: MICHAEL P. MANNING
(The name of the committee must include the candidate's last name)

2. Committee Address: 12 FENNO WAY NAHANT

2a. Mailing Address: 12 FENNO WAY NAHANT

3. Purpose: RE-ELECTION

4. Officers:

	Name	Residential Address	Zip	Tel. No.
Chairman:	MICHAEL P. MANNING,	12 FENNO WAY		
Treasurer:		NAHANT MA		
Other officer:			781	596 2615
Other officer:				

Attach additional page, if necessary, with other officers and finance committee, if any

5. Candidate: MICHAEL P. MANNING 12 FENNO WAY NAHANT
Name Address Zip Tel. No.

6. Office Sought: SELECTMAN NAHANT
Title District Party affiliation, if applicable

I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.
SIGNED UNDER THE PENALTIES OF PERJURY:

Michael P. Manning — 29 MAY 2010
Candidate's signature — Date

I hereby accept the office of treasurer of the above-named committee. I understand that I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.
SIGNED UNDER THE PENALTIES OF PERJURY:

Michael P. Manning — 29 MAY 2010
Treasurer's signature — Date

I hereby accept the office of Chairman of the above-named committee.
SIGNED UNDER THE PENALTIES OF PERJURY:

Michael P. Manning — 29 MAY 2010
Chairman's signature — 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	
MAR 1 2010	SEASIDE BUSINESS SERVICES	P.O BOX 88 NAHANT MA	HARBOR REVIEW AD	202	50
MAR 3 2010	MAKE STICKERS	8061 186th ST TINLEY PK, IL	I LIKE MIKE BUMPER STICKER	120	00
APR 1 2010	SEASIDE BUSINESS SERVICES	P O BOX 88 NAHANT	HARBOR REVIEW AD	202	50
APR 10 2010	PRICE RITE	LYNN MA	EASTER EGGS	80	00
		Line 12: Expenditures over $50		405	00
		Line 13: Expenditures $50 and under*			
Enter on page 1, line 4		**Line 14: TOTAL EXPENDITURES**		405	00

*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
	NONE			
		Line 15:	In-kind over $50	
		Line 16:	In-kind $50 and under	
Enter on page 1, line 6		**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
	NONE			
Enter on page 1, line 7		**Line 18: OUTSTANDING LIABILITIES (ALL)**		

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.