



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
CITY CLERK'S OFFICE
CHELSEA, MA

Commonwealth
of Massachusetts

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 NOV -1 A 8:39

Fill in dates:	Month	Date	Year	Month	Date	Year
Reporting Period Beginning	8	27	2011	Ending	10	31 2011

Type of report: (Check one)

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

Matthew Richard Frank
Full Name of Candidate (if applicable)

City Council District 3
Office Sought and District

67 Gillon Rd
Residential Address

Tel. No. (optional)

Committee to Elect Matt Frank
Committee Name

Michael Albano
Name of Committee Treasurer

67 Gillon Rd Chelsea MA
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) \$ 565

Line 3: Subtotal (line 1 plus line 2) \$ 565

Line 4: Total expenditures this period (page 3, line 14) \$ 450

Line 5: Ending balance (line 3 minus line 4) \$ 105

Line 6: Total in-kind contributions this period (page 4) \$ 150

Line 7: Total (all) outstanding liabilities (page 4) \$ 0

Line 8: Name of bank(s) used Chelsea 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:

Michael Albano
Treasurer's signature (in ink)

10/31/11
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:

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)
10/7/11	THOMAS CARON 17 PARK ST WAREHOUSSE MA	100	00	
9/1/11	RONALD HANSON 22 WILLARD CHELSEA MA	60	00	
9/1/11	JERRY DANSON BOSTON MA	60	00	
Line 9: Total receipts in excess of \$50 (or listed above)		200	00	
Line 10: Total receipts \$50 and under* (not listed above)		335	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		535	00	2565.00 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.

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
9/15/11	RUTHIEA FRANK	41 Gillory rd Chelsea MA 02150	Supplies and Facilities.	\$150
Line 15: In-kind over \$50				150
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				150

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
Line 18: OUTSTANDING LIABILITIES (ALL)				

Enter on page 1, line 7

