



Form CFP 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

CITY CLERK OFFICE

2019 OCT 28 PM 1:26

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2019 Ending Date: 10/27/2019

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

Michael David Scire
Candidate Full Name (if applicable)
Ward 7 Alderman
Office Sought and District
2 Lee Road Woburn, MA 01801
Residential Address
E-mail: mikescire@gmail.com
Phone # (optional): 781-718-4549

Committee Name
Name of Committee Treasurer
Committee Mailing Address
E-mail:
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Table with 2 columns: Description (Line 1-8) and Amount. Line 1: Ending Balance from previous report. Line 2: Total receipts this period (\$1,004.09). Line 3: Subtotal (\$1,004.09). Line 4: Total expenditures this period (\$1,004.09). Line 5: Ending Balance (\$0). Line 6: Total in-kind contributions. Line 7: Total outstanding liabilities. Line 8: Name of bank(s) used.

Affidavit of Committee Treasurer: I certify that I have examined this report... Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 10/27/19

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)
Candidate with Committee []
Candidate without Committee [X]
Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 10/27/19

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)
8/15/2019	Michael David Scire)Self	\$1,004.09	Unemployed (used my own money)
Line 9: Total Receipts over \$50 (or listed above)		\$1,004.09	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$1,004.09	← 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.

