



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
 Reporting Period Beginning 9 5 09 Ending 10 16 09

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

Marc L. Laplante
 Full Name of Candidate (if applicable)
City Council District F
 Office Sought and District 01843
29 Durso Ave. Lawrence MA
 Residential Address
 Tel. No. (optional)

Committee To Elect Marc Laplante
 Committee Name
Denise Hofmann
 Name of Committee Treasurer 01843
29 Durso Ave. Lawrence MA
 Committee Mailing Address
 Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	<u>\$2447.82</u>
Line 2: Total receipts this period (page 2, line 11)	<u>\$ 740.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$3187.82</u>
Line 4: Total expenditures this period (page 3, line 14)	<u>\$ 1507.43</u>
Line 5: Ending balance (line 3 minus line 4)	<u>\$ 1680.39</u>

Line 6: Total in-kind contributions this period (page 4)	<u>\$ 100.00</u>
Line 7: Total (all) outstanding liabilities (page 4)	<u>\$ 1256.52</u>
Line 8: Name of bank(s) used	<u>Citizens</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:
Denise Hofmann 10-22-09
 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:
Marc Laplante 10/24/09
 Candidate's 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)
	<i>see attachment</i>		

Marc Laplante
Schedule A: Receipts

All receipts over \$50 in a calendar year must be reported, any over \$200 must give occupation

Date	Last Name - List in alphabetical order	Residential Address	City	State	Zip	Amount	Occupation
9/10/2009	Cuddy, John	Andover Street	Lawrence	MA	01843	\$20.00	
9/10/2009	Fink, Sue	6 Rockwood Lane	Lawrence	MA	01843	\$15.00	
9/10/2009	Hoole, James	26 Durso Ave	Lawrence	MA	01843	\$15.00	
9/23/2009	Nichols, Mary Louise	4 Orchard Street	Methuen	MA	01844	\$50.00	
9/10/2009	Nimmo, Norm	24 Yale Street	Lawrence	MA	01841	\$25.00	
9/5/2009	Nunez, Alberto	6 Alexander Circle	Methuen	MA	01844	\$100.00	
9/10/2009	Paige, Mary	14 Halsey Street	Lawrence	MA	01843	\$15.00	
						Line 9: Total Receipts in excess of \$50	\$240.00
						Line 10: Total Receipts \$50 and under	\$500.00
						Line 11: Total Receipts in the Period	\$740.00

Enter on page 1, line 2

Line 9: Total receipts in excess of \$50 (or listed above)	240	00		
Line 10: Total receipts \$50 and under* (not listed above)	500	00		
Line 11: TOTAL RECEIPTS IN THE PERIOD	740	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
9-17-09	The Claddagh Pub	399 Canal St 01843 Lawrence MA	Room For Event	100.00
Line 15: In-kind over \$50				100.00
Line 16: In-kind \$50 and under				6
Line 17: Total In-kind				100.00

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
2-13-09	Marc Laplante	29 Durso Ave Lawrence MA	open bank account	25.00
2-20-09	Marc Laplante	29 Durso Ave Lawrence MA	loan to start campaign	800.00
2-25-09	Marc Laplante	29 Durso Ave Lawrence MA	stationery	45.52
3-26-09	Susan Laplante	29 Durso Ave Lawrence MA	catering for fund raiser	108.00
8-13-09	Marc Laplante	29 Durso Ave Lawrence MA	door hangers	278.00
Line 18: OUTSTANDING LIABILITIES (ALL)				1256.52

Enter on page 1, line 7

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.