



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 01 / 01 / 2010 Ending 04 / 21 / 2010

Type of report: (Check one)

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

Lynda Arlene Walsh
Full Name of Candidate (if applicable)

Selectman
Office Sought and District

8 Pond Ave Foxboro
Residential Address

508-543-2668
Tel. No. (optional)

Committee to elect Lynda Walsh
Committee Name

Sandra Emery
Name of Committee Treasurer

51 Sherman St Foxboro
Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$	<u>454-</u>
Line 2: Total receipts this period (page 2, line 11)	\$	<u>2610-</u>
Line 3: Subtotal (line 1 plus line 2)	\$	<u>3064-</u>
Line 4: Total expenditures this period (page 3, line 14)	\$	<u>1780.70</u>
Line 5: Ending balance (line 3 minus line 4)	\$	<u>1283.30</u>

Line 6: Total in-kind contributions this period (page 4)	\$	<u>104.24</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$	<u> </u>
Line 8: Name of bank(s) used		<u>TD Bank North</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.

Sandra Emery Signed under the penalties of perjury: _____ Date 4-21-10

Treasurer's signature (in ink)

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.

Lynda A Walsh Signed under the penalties of perjury: _____ Date 4-21-10

Candidate signature (in ink)

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	
3/29/10	Richard Advertising	35 Temean St Dorchester MA	Signs	796	87
4/6/10	Dr Don's Buttons	3906 W Morrow Glendale AZ	Buttons	111	56
4/7/10	Foxboro Reporter	Meehanic St Foxboro MA	AD	104	50
4/14/10	Foxboro Reporter	Meehanic St Foxboro MA	AD	162	00
4/20/10	Foxboro Reporter	Meehanic St Foxboro MA	AD	591	00
Line 12: Expenditures over \$50				1765	93
Line 13: Expenditures \$50 and under*				14	77
Line 14: TOTAL EXPENDITURES				1780	70

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	104.24
			Line 17: Total In-kind	104.24

* 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)	—