



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

Fill in Reporting Period dates: Beginning Date: 9/2/2017 Ending Date: 10/20/2017

Type of Report: (Check one)

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

Eunice Delice Zeigler

Candidate Full Name (if applicable)

Methuen East District Councilor

Office Sought and District

25 North Street Methuen, MA 01844

Residential Address

E-mail: _____

Phone # (optional): _____

Committee to Elect Eunice D. Zeigler

Committee Name

Samuel Jacob Zeigler

Name of Committee Treasurer

25 North Street Methuen, MA 01844

Committee Mailing Address

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$1,693.94
Line 2: Total receipts this period (page 3, line 11)	\$3,000.00
Line 3: Subtotal (line 1 plus line 2)	\$4,693.94
Line 4: Total expenditures this period (page 5, line 14)	\$2,457.70
Line 5: Ending Balance (line 3 minus line 4)	\$2,235.36
Line 6: Total in-kind contributions this period (page 6)	\$309.00
Line 7: Total (all) outstanding liabilities (page 7)	\$890.00
Line 8: Name of bank(s) used:	Lowell Five Savings 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: _____

(Treasurer's signature)

Date: 10/30/17

FOR CANDIDATE FILINGS ONLY: 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's signature)

Date: 10/30/17

RECEIVED
CITY CLERK'S OFFICE
METHUEN, MA
2017 NOV - 1 AM 12:07

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.

(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)
9/13/2017- 9/30/17	Eunice Zeigler 25 North Street Methuen, MA 01844	\$560.00	candidate loan
9/21/2017	Josh Ferry 5 Tanglewood Circle Methuen, MA 01844	\$100.00	
10/5/2017	Ayesha Khan 8 Applecrest Dr. Methuen, MA 01844	\$250.00	Homemaker
10/5/2017	Matthew Kranells 61 Cox Lane Methuen, MA 01844	\$200.00	Assistant Town Administrator Town of Reading
10/5/17	Linda Dean Campbell 42 Sugar Pine Lane Methuen, MA 01844	\$100.00	State Representative Commonwealth of MA
10/5/2017	Methuen Police Superior Officers PO BOX 789 Methuen, MA 01844	\$200.00	PAC Donation
10/11/2017	Eileen Giordano 76 Bonnano Court Methuen, MA 01844	\$100.00	
10/11/2017	Carpenters Local Union 111 13 Branch Street Methuen, MA 01844	\$250.00	PAC Donation
10/12/2017	Methuen Firefighters Local 1691 24 Lowell Street Methuen, MA 01844	\$500.00	PAC Donation
10/16/2017	Maria Cordero 5 Packard Street Methuen, MA 01844	\$100	
10/19/2017	Michael Hubbard 1 Boxwood Drive Methuen, MA 01844	\$100	
Line 9: Total Receipts over \$50 (or listed above)		\$2,460.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$540.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$3,000.00	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

← 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 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.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, 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
9/6/2017	Merrimack Valley Substance Abuse Project	9 Cochrane Street Methuen, MA 01844	Opioid Addiction Awareness Event Sponsorship	\$125.00
9/15/2017	Loop Weekly Ad	236 Pleasant Street Suite 238-B Methuen, Ma 01844	Political Ad	\$75.00
9/14/2017	Connolly Printing	17b Gill Street Woburn, MA 01801	Mailed postcards	\$1,875.41
10/5/2017	Minuteman Press	1527 Middlesex Street Lowell, MA 01854	Palm cards	\$289.44
10/16/2017	Vistaprint	275 Wyman Street Waltham, MA 02451	postcards	\$76.45
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				\$16.40
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$2,457.70

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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
			Line 12: Expenditures over \$50 (or listed above)	
			Line 13: Expenditures \$50 and under* (not listed above)	
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	

* 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 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
9/22/17	Laborer's Local 175	55 Union Street Methuen, MA 01844	Valley Patriot Ad	\$309.00
Line 15: In-Kind Contributions over \$50 (or listed above)				\$309.00
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				\$309.00

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. Page 6

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
9/13/2017	Eunice Zeigler	25 North Street Methuen, MA 01844	Candidate Loan	\$400.00
9/30/2017	Eunice Zeigler	25 North Street Methuen, MA 01844	Candidate Loan	\$160.00
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				\$560.00