



# Form CPF 102ND : Campaign Finance Report

## Office of Campaign and Political Finance

Commonwealth of Massachusetts

File with: Director

Office of Campaign and Political Finance  
One Ashburton Place  
Boston, MA 02108  
(617) 727-8352

CPF ID# \_\_\_\_\_

Please print or type all information, except signatures.

**Fill in dates:**

Reporting Period Beginning JAN 1 2013 Ending 31 Dec 2013

**Type of report: (Check one)**

8th day preceding primary  8th day preceding election  year-end report  dissolution  30 days after special election

John Hodgson

Full Name of Candidate

SELECTMAN

Office Sought/District

56 GREAT OAK RD ORLEANS

Residential Address

774 722 9121

Tel. No. (optional)

Committee to Elect John Hodgson

Committee Name

Belinda Messersmith

Name of Committee Treasurer

56 GREAT OAK RD ORLEANS MA

Committee Mailing Address

508 2373608

Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

|  |                   |
|--|-------------------|
| Line 1: Ending balance from previous report              | \$ <u>2190.10</u> |
| Line 2: Total receipts this period (page 2, line 11)     | \$ <u>0</u>       |
| Line 3: Subtotal (line 1 plus line 2)                    | \$ <u>2190.10</u> |
| Line 4: Total expenditures this period (page 3, line 14) | \$ <u>400.00</u>  |
| Line 5: Ending balance (line 3 minus line 4)             | \$ <u>1790.10</u> |
| Line 6: Total in-kind contributions this period (page 4) | \$ <u>0</u>       |
| Line 7: Total (all) outstanding liabilities (page 4)     | \$ <u>0</u>       |
| Line 8: Name of bank(s) used                             | <u>SANTANDER</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:

Treasurer's signature (in ink)

*[Handwritten Signature]*

Date 1-19-14

**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, and 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, and 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 (in ink)

*[Handwritten Signature]*

Date 1/19/14

ORLEANS TOWN CLERK  
14 JAN 27 4:35PM

