



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

2020 JAN -9 A 11:00

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Oct. 19, 2019 Ending Date: Dec. 31, 2019

Type of Report: (Check one) CITY CLERK  
FALL RIVER, MA  
 8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

TIMOTHY P, McCOY  
Candidate Full Name (if applicable)  
SCHOOL COMMITTEE  
Office Sought and District  
93 GRATTAN ST, FALL RIVER  
Residential Address  
E-mail:  
Phone # (optional): 774-301-4901

COMMITTEE TO ELECT TIM MCCOY  
Committee Name  
ALBERT J. MCCOY  
Name of Committee Treasurer  
93 GRATTAN ST, FALL RIVER  
Committee Mailing Address  
E-mail:  
Phone # (optional): 508-678-5841

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>2,680.56</u>
Line 2: Total receipts this period (page 3, line 11)	<u>250.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>2880.56</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>2542.34</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>338.22</u>
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	<u>FALL RIVER MUNICIPAL CREDIT UNION</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: Albert J. McCoy (Treasurer's signature) Date: 1/8/20

#### 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: [Signature] (Candidate's signature) Date: 1/8/20



