

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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rill in Reporting Period dates: Beginning Date: Jar	n 1, 2024 Ending Date: Mar 29, 2024			
Type of Report: (Check one)				
■ 8th day preceding preliminary ■ 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution			
Christopher James Tribou	Committee to Elect Christopher Tribou			
Candidate Full Name (if applicable) Planning Board Committee Member - Billerica	Committee Name Tyler Tribou			
Office Sought and District 13 Bridle Road, Billerica, MA 01821	Name of Committee Treasurer  13 Bridle Road, Billerica, MA 01821			
Residential Address E-mail: ctdelivers185@gmail.com	Committee Mailing Address E-mail: tdtribou@gmail.com			
Phone #: 978-987-9790	Phone #: 978-987-9018			
SUMMARY BALAN	CE INFORMATION:			
Line 1: Ending Balance from previous report	\$1029.60			
Line 2: Total receipts this period (page 3, line 12)	\$400.01			
Line 3: Subtotal (line 1 plus line 2)	\$1429.61			
Line 4: Total expenditures this period (page 5, line 15	\$1043.91			
Line 5: Ending Balance (line 3 minus line 4)	\$385.70			
Line 6: Total in-kind contributions this period (page 6				
Line 7: Total (all) outstanding liabilities (page 7, line	, 45155			
Line 8: Total out-of-pocket expenses this period (page	28, line 22) #6.00			
Line 9: Name of bank(s) used: TD 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:				
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 1	box only)			
	he best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ng period that are not otherwise disclosed in this report.			
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the second contributions.	nts, in-kind contributions and liabilities for this reporting period and represents the this candidate in accordance with the requirements of M.G.L. c. 55.			
Signed under the penalties of perjury: Wystospher of til	Date: 93/29/2914			

#### SCHEDULE A: RECEIPTS

4.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar ear. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor o 50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and ecords of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions eccived. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule E Liabilities.

\*\*ttach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Name and Residential Address			Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
18 March 24	Christopher Tribou 13 Bridle Road, Billerica, MA 01821	\$400.00	Project Coordinator, Standard Electric	
20 March 24	TD Bank New Debit Card Verification Check 751 Main Street, Waltham, MA 02451	\$0.01	Not Applicable	

# **SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
		]	
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Line 10: Total Receipts over \$50 (or listed above)		* If you have itemized receipts of \$50 and	
Line 11: Total Reco	eipts \$50 and under (not listed above)		under, include them in line 10. Line 11 should include only those receipts not itemized above.
Line 12: TOTAL	RECEIPTS IN THE PERIOD	\$400.01	← Enter on page 1, line 2

#### **SCHEDULE B: EXPENDITURES**

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
21 March 24	Thriftco Printing	56 Pulaski Street Peabody, MA 01960	Election Signs	\$500.00
25 March 24	Thriftco Printing	56 Pulaski Street Peabody, MA 01960	Election Signs	\$543.91

# **SCHEDULE B: EXPENDITURES (continued)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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				***************************************
and under, include them in line 13. Line 14		Line 13: Expenditures over \$50 (or listed above)		
		Line 14: Expenditures \$50 and under (not listed above)		
	Enter on page 1, line 4 →			

### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

A.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and ecords of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions eceived. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all receipts. Please

clude the candidate or committee name and a-page number on each additional page.				
Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
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* If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.		Line 16: In-Kind Contributions over	er \$50 (or listed above)	
		Line 17: In-Kind Contributions \$50	0 and under (not listed above)	
Enter on page 1, line 6 → Line 18: TOTAL IN-KIND CONTRIBUTIONS IN THE PERIOD				

### **SCHEDULE D: LIABILITIES**

\* M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and the outstanding balance, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
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***************************************				Managarina Angarana A
	(Malauli 1994)	Line 19: TOTAL OUTSTAN		

### SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

	N NATH ON A		
Date Paid	Name and Address of Vendor (alphabetical listing required)	Amount	Durnoso of Evnandituus
Date Laiu	(aibuanenear usung tedunten)	Amount	Purpose of Expenditure
Tine 20: Total Years	ad Out Of Pagint Even disuse Over \$50		
Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50 (or listed above)			* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21
Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and			should include only those expenditures not
under (not listed above)			itemized above.
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD			← Enter on page 1, line 8