



Commonwealth of Massachusetts

# Form CPF 102ND : Campaign Finance Report

## Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE

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

2009 OCT 26 P 1:39  
CPF ID#  
BOSTON, MA

Please print or type all information, except signatures.

Fill in dates:  
Reporting Period Beginning 09 05 09 Ending 10 16 09

Type of report: (Check one)

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

CHARLES (CHUCK) TURNER

Full Name of Candidate

CITY COUNCIL DIST 7

Office Sought/District

63 BEECHGLEN ST ROXBURY

Residential Address

617 427 1667

Tel. No. (optional)

Comm to Elect CHUCK TURNER

Committee Name

TERRI SMALL TURNER

Name of Committee Treasurer

63 BEECHGLEN ST ROXBURY

Committee Mailing Address

617 427 1667

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 537.11

Line 2: Total receipts this period (page 2, line 11) \$ 11844.29

Line 3: Subtotal (line 1 plus line 2) \$ 12381.40

Line 4: Total expenditures this period (page 3, line 14) \$ 8239.13

Line 5: Ending balance (line 3 minus line 4) \$ 4142.27

Line 6: Total in-kind contributions this period (page 4) \$ 0

Line 7: Total (all) outstanding liabilities (page 4) \$ 158990.58

Line 8: Name of bank(s) used ONE UNITED 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:

TERRI SMALL TURNER  
Treasurer's signature (in ink)

10/26/09  
Date

#### 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:

CHARLES TURNER  
Candidate's signature (in ink)

10/25/09  
Date

**SCHEDULE A: RECEIPTS**

*Comm to Elected Chuck Turner page 1*

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name, CPF ID# 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)
9/18/09	JACOB Abdal Khalilag PO Box 727 Roxbury	50 00	
9/18/09	ELVA Abdal Khalilag 48 Elmore St Rox	100 00	
9/21/09	SHARIF Abdal Khalilag 2821 Washington St Rox	250 00	owner SAAKS REALTY
9/29/09	MANDIE Araujo 69 Sherrick Av Holbrook	150 00	
10/14/09	STEVE BACKMAN 8 BARWELL ST JP	50 00	
9/29/09	Mel BARKER 109 Commonwealth Ave Bos	150 00	
9/29/09	VESPER BARNES 10 Malcolm X Blvd Bos	150 00	
9/11/09	Joseph Borsellino 55 BARROWS St Dedham	10 00	
9/18/09	George Brown 64 Regent ST Rox	100 00	
9/21/09	Richard Brown PO Box 1908 64 Bos	100 00	letter to be sent 10/26/09
9/18/09	Douglas Brugge 59 Blanchard Rd Cam	25 00	
9/21/09	Lee BUCKLEY PO Box 6049 Bos	15 00	letter to be sent 10/26/09
9/29/09	DORIS Bunte 375 Mt Vernon St Dor	100 00	
9/29/09	OSCAR CARLOS 202 River Rd Andover	150 00	
9/29/09	EDGAR Carrere 15 Loeden Dr No Andover	150 00	
Line 9:	Total receipts in excess of \$50 (or listed above)		
Line 10:	Total receipts \$50 and under* (not listed above)		
Line 11:	<b>TOTAL RECEIPTS IN THE PERIOD</b>	<b>1550 00</b>	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**

*Comm to elect Chuck Turner page 2*

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name, CPF ID# 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)
9/18/09	CAROLINE Chang 33 GALLIVAN BLVD Dor	50 00	
9/18/09	minnie CLARK 52 HUMBOLDT AV Roy	200 00	prop manager MARKSDALE HOUSING
9/29/09	minnie CLARK 52 HUMBOLDT AV Roy	200 00	prop manager MARKSDALE HOUSING
9/18/09	Julia COFIELD 67 MONTVIEW ST W Roxbury	100 00	
9/11/09	Deborah COHAN 98 OLD CONNECTICUT PATH Fram	10 00	
9/29/09	KARL COISCOU PO BOX 240 857 Dor	100 00	letter to be sent 10/26/09
10/5/09	MARYJO CONNOLLY 36 MARSHALL ST Somerville	50 00	
9/11/09	Poliz COOPER PO BOX 752 Roy	100 00	letter to be sent 10/26/09
9/18/09	Helen COX 41 PARK DR Bos	100 00	
9/29/09	DANIEL CRUZ 49 CEDAR ST Roy	150 00	
9/21/09	William CUNNINGHAM 6 NEWTONE CT Cam	75 00	
9/18/09	C QUENTIN DAVIS 666 METROPOLITAN AV Hp	25 00	
9/29/09	Rodney DELEAVER 7 PARKER ST HP	150 00	
9/29/09	MANUEL DESINA 140 HUMBOLDT AV Dor	150 00	
9/29/09	LOURENCO DOCAANTO 6 MARSHFIELD ST Roy	150 00	
Line 9: Total receipts in excess of \$50 (or listed above)			
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1610 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**

Comm to elect **Chuck Turner** page 3

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name, CPF ID# 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)
9/11/09	Ellen Doiley 14 Linwood St Rox	200 00	letter to be sent 10/26/09
9/11/09	NORMA EASON 162-164 River St MAHAPAN	50 00	
9/29/09	LOUIS ELISA 68 Seaver St Dor	100 00	
9/18/09	DAVID ENGLAND 20 White Pl Brookline	35 00	
9/18/09	Joseph Feaster 51 Elmore St Rox	50 00	
9/18/09	Bruce Fleischer 112 Bynner St JD	25 00	
9/18/09	Victor Francis PO Box 366323 H.P	100 00	letter to be sent 10/26/09
9/29/09	Victor Francis PO Box 366323 HP	150 00	letter to be sent 10/26/09
10/14/09	CLAIRE GOSSELIN 25 Cotton St Roslindale	100 00	
9/18/09	SUSAN GRACEY 18 Monmouth St Brookline	50 00	
9/18/09	ELISABETH GREEN 3 Grew Hill Rd Roslindale	25 00	
9/29/09	CALVIN GRIMES 24 Kings Core Way No Weymouth	150 00	
9/18/09	Cecil Guscott 5 HARTWELL ST Dor	100 00	
9/18/09	HILDEGARDE HANNUM PO Box 190 Old Lyme Ct	100 00	letter to be sent 10/26/09
9/18/09	CORNELIUS HASTIE 24 CASTLETON ST JD	25 00	
Line 9: Total receipts in excess of \$50 (or listed above)			
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1260 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**

*Comm to elect Chuck Turner page 4*

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name, CPF ID# 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)
10/5/09	CATHERINE Hoffman 67 Pleasant St Cam	25 00	
9/18/09	Rosemary Hurley 54 Forest St Roy	20 00	
10/5/09	Syvalia Hyman 178 Humboldt Ave Roy	50 00	
9/11/09	Jonathan JACKSON PO Box 16 Roy	200 00	retired letter to be sent 10/26/09
9/18/09	Laura Jennings Cranford 43 Linnegan St Cam	100 00	
9/11/09	DARlene Jeter 79 Florence St Chestnut Hill	100 00	
9/18/09	Arnold Johnson 75 Tiffany Dr Randolph	100 00	contractor CROSSWINDS Inc
9/21/09	Frederick Johnson 161 Townsend St Dor	100 00	
10/16/09	Arnold Johnson 75 Tiffany Dr Randolph	150 00	contractor CROSSWINDS Inc
9/18/09	JANet Jones 94 CLARKSON St Dor	150 00	
9/18/09	PAMELIA Jones 38 DECKARD St Roy	100 00	
9/18/09	KARI Jones 41 Monadnock St Dor	100 00	
9/29/09	EVA Kerr 246 Huntington Av Bos	40 00	
9/18/09	KATHERINE Kilbourn 98 Brookside Av JP	25 00	
9/11/09	Richard King 120 Humboldt Av Dor	25 00	
Line 9: Total receipts in excess of \$50 (or listed above)			
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1285 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**

Comm to elect **Chuck Turner** page 5

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name, CPF ID# 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)
10/14/09	Melvin King 4 Yarmouth St Bos	50 00	
10/14/09	Melvin King 4 Yarmouth St Bos	50 00	
10/5/09	Lowell Kingsley 16 Howe St Dor	25 00	
9/18/09	Susan Klimczak 140 Clarendon St Bos	5 00	
9/11/09	John Lacroix 3050 NE 16th Av Oakland CA	50 00	
9/18/09	Ann Langone 14 Mayhew St Bos	50 00	
9/18/09	DAVE LEWIS 271 DARMOUTH ST BOS	50 00	
10/5/09	WALTER LITTLE PO Box 470 Stoughton	500 00	ADMINISTRATOR Hr to be sent Grove Hall Daycare
9/18/09	Lydia Lowe 45 Rindge Av Cam	50 00	
9/11/09	DEBBIE LUBAR 55 Atherton St Ray	50 00	
9/18/09	MARILYN LYNCH 2817 WASHINGTON ST RAY	35 00	
9/11/09	Donald Madrey 1 Blackstone St Cam	100 00	
9/29/09	Francois Magny 908 WASHINGTON ST Dor	150 00	
9/18/09	John Mannheim 5 Chestnut St Concord	50 00	
9/29/09	DEBRA MANNHEIM 14 Winslow Rd Needham	150 00	
Line 9: Total receipts in excess of \$50 (or listed above)			
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1365 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**

*Comm to elect Chuck Turner page 6*

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name, CPF ID# 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)
9/29/09	LUCILLE MARIUS 28 Ledge Hill St Randolph	150 00	
9/11/09	Kate MATTHEWS 11 Rosewood St Stoughton	75 00	
9/18/09	DAVID McQUIRE 35 DENNISON St Rof	100 00	
9/29/09	Terrence McLARNEY 717 E 2nd St So BOSTON	250 00	LAWYER UMASS BOSTON
9/29/09	Hubert McLean 14 ROCKVILLE PIC BOS	25 00	
9/18/09	Stephen Meacham 10 Laurel St Cam	100 00	
9/18/09	Shirley Miller 51 Lincoln ST W Medford	25 00	
9/18/09	Joan Miller 2942 WASHINGTON St Rof	50 00	
9/18/09	Richard Monks 26 Boynton St JP	50 00	
9/18/09	George Morrison 6 Centre St Rof	100 00	
10/16/09	Phillip Myrick 36 PASADENA Rd Dor	100 00	
9/11/09	SUSAN NAIMARK 133 PAUL Gore St JP	50 00	
10/14/09	THOMAS NUTT POWELL 57 Westbourne Ter Brookline	100 00	
9/18/09	CICILY O'BRYANT 52 Hillsboro Rd Matt	25 00	
9/11/09	CARRIE OSBORNE Jefferson 38 Juniper St Rof	25 00	
Line 9: Total receipts in excess of \$50 (or listed above)			
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1225 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**

*Comm to elect Chuck Turner page 9*

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name, CPF ID# 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)
9/18/09	Irene Smalls 2 Durham St BOS	50	00	
9/18/09	MG Smith 94 Moreland St Rox	100	00	
10/5/09	Courtney Snegroff 49 PAUL GORE ST JP	25	00	
9/18/09	Ruthann Sneider 30 PERRY ST Brookline	50	00	
9/29/09	Donna Snow Reid 120 HUMBOLDT AV Dor	150	00	
9/18/09	Pauline Solomon 104 Oldham Rd WNewton	50	00	
9/29/09	Christopher Sonnie 9308 Standerwic In <sup>Hunters</sup> Hill N.C.	150	00	
9/21/09	Victoria Steinitz 105 Trowbridge St Cam	100	00	
9/18/09	Thelma Toles 49 Juniper St Rox	50	00	
9/15- 10/16/09	Charles Turner 63 Beechgrove St Rox	257	06	CANDIDATE loans
10/16/09	Samuel WARD 350 Rockland St BROCKTON	150	00	
9/29/09	Michael Washington 46 Kings Way WALTHAM	150	00	
9/18/09	Thomas Welch 58 ELIOT ST JP	100	00	
9/18/09	GATEWOOD WEST 63 Creighton St Cam	50	00	
9/18/09	Katherine Wheaton 258 HARVARD ST Brookline	250	00	letter to be sent 10/26/09
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD		1682	06	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**

Comm to elect **CHUCK TURNER** page 1

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, CPF ID# and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
10/7/09	ANGELA YARDE	Cragmere Terr MATTAPAN	Reimb	4	19
10/7/09	ANGELA YARDE	Cragmere Terr mattapan	Reimb	10	92
10/7/09	ANGELA YARDE	Cragmere Terr mattapan	Reimb	7	68
9/22/09	BROOKLINE ICE & COA1	Brookline	ICE	30	00
10/7/09	CHARLES TURNER	Beechglen St Rox	Reimb	22	00
10/7/09	CHARLES TURNER	Beechglen St Rox	Reimb	20	00
10/7/09	CHARLES TURNER	Beechglen St Rox	Reimb	29	73
10/7/09	CHARLES TURNER	Beechglen St Rox	Reimb	30	00
10/7/09	CHARLES TURNER	BEECHGLEN ST ROX	Reimb	70	75
10/7/09	CHARLES TURNER	BEECHGLEN ST ROX	Reimb	110	00
10/7/09	CHARLES TURNER	BEECHGLEN ST ROX	Reimb	140	00
10/7/09	CHARLES TURNER	BEECHGLEN ST ROX	Reimb	160	00
9/26/09	DELL Computer	PO Box 5262 CAROL Stream Ill	comp rental	30	70
9/22/09	Dunkin Donuts	Dudley Sq Roxbury	meals	220	79
7/23/09	Dunkin Donuts	Dudley Sq Roxbury	meals	4	01
Line 12: Expenditures over \$50					
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				890	77

Enter on page 1, line 4

\* If you have itemized expenditures \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized above.

**SCHEDULE B: EXPENDITURES**

*Comm to elect Chuck Turner page 2*

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, CPF ID# and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
8/4/09	Dunkin Donuts	Dudley Sq Roxbury	Meals	3	11
10/5/09	Geek choice	617 227 0314	computer repair	150	00
9/21/09	Hallway Party Central	MLK Blvd Roxbury	Supplies	15	15
8/12/09	Hatoffs	3440 Washington St JP	travel	25	00
8/10/09	Home Depot	50 Bay ctr Dor	Supplies	23	71
9/21/09	Kennedy fried chicken	2300 Washington St Rox	Meals	20	00
10/13/09	Kinkos	Dartmouth St Bos	printing	59	53
10/5/09	Kinkos	Dartmouth St Bos	printing	162	54
10/1/09	LARRY WEDGEWORTH		MUSIC	300	00
10/7/09	National Grid	PO Box 4300 Woburn	heat	32	70
9/16/09	NETgraphix	36 Warren St Roxbury	printing	200	00
10/7/09	NSTAR	INSTAR way Westwood	elec	129	71
9/25/09	Nuestra prop	391 Dudley St Rox	rent	956	68
9/30/09	ONE United Bank	Washington St Rox	bank fee	10	00
10/2/09	ONE United Bank	Washington St Rox	Ret Check	150	00
Line 12: Expenditures over \$50					
Line 13: Expenditures \$50 and under*					
<b>Line 14: TOTAL EXPENDITURES</b>				<b>2238</b>	<b>13</b>

Enter on page 1, line 4

\* If you have itemized expenditures \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized above.

**SCHEDULE B: EXPENDITURES**

*Comm to elect Chuck Turner page 3*

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, CPF ID# and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
10/2/09	ONE United BANK	WASHINGTON ST ROY	BANK fee	10	00
10/2/09	ONE United BANK	WASHINGTON ST ROY	ret check	150	00
10/2/09	ONE United BANK	WASHINGTON ST ROY	BANK fee	10	00
9/21/09	Petty CASH	Dwopley office ROY	petty CASH	145	23
9/22/09	Petty CASH	Dwopley office ROY	petty CASH	76	00
10/5/09	Phillip Reason	16 ROCKVILLE PK ROY	CONSULTANT	400	00
9/10/09	Phillip Reason	16 ROCKVILLE PK ROY	CONSULTANT	300	00
9/18/09	Phillip Reason	16 ROCKVILLE PK ROY	CONSULTANT	300	00
9/25/09	Phillip Reason	16 ROCKVILLE PK ROY	CONSULTANT	300	00
10/2/09	Phillip Reason	16 ROCKVILLE PK ROY	CONSULTANT	400	00
10/2/09	Phillip Reason	16 ROCKVILLE PK ROY	CONSULTANT	400	00
10/7/09	Phillip Reason	16 ROCKVILLE PK ROY	Reimb	20	00
10/7/09	Phillip Reason	16 ROCKVILLE PK ROY	Reimb	31	73
10/7/09	Poland Springs	DIXIE H YWAY LOUISVILLE KY	water	50	31
1/7/09	POST office	Dwopley Sg ROY	Postage	8	40
Line 12: Expenditures over \$50					
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				2601	67

Enter on page 1, line 4

\* If you have itemized expenditures \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized above.

**SCHEDULE B: EXPENDITURES**

*Comm to elect Chuck Turner page 4*

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, CPF ID# and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
2/9/09	Post office	Dudley Sq Rox	Postage	31	50
8/18/09	Post office	Dudley Sq Rox	Postage	8	40
10/7/09	Quill	PO Box 37600 Phil Pa	Supplies	173	07
10/7/09	Reliable Janitorial	74 Crestwood Park Dor	Cleaning	275	00
8/3/09	Rite Aid	30 River St Matt	Supplies	12	73
9/21/09	Save A Lot	MLK Blvd Rox	Meals	90	11
9/22/09	Save A Lot	MLK Blvd Rox	Meals	53	46
9/22/09	Spinates Subs	Dudley Sq Rox	meals	53	00
9/22/09	Spinates Subs	Dudley Sq Rox	meals	106	00
9/22/09	Spinates Subs	Dudley Sq Rox	meals	265	00
8/25/09	STASH'S Grill	Dudley Sq Rox	meals	21	25
7/27/09	STOP & SAVE	310 Blue Hill Av Dor	Supplies	6	55
10/7/09	Terri Small Turner	BEECHGLEN ST Rox	Reimb	53	05
10/7/09	Terri Small Turner	BEECHGLEN ST Rox	Reimb	17	92
10/7/09	Terri Small Turner	Beechglen St Rox	Reimb	10	63
Line 12: Expenditures over \$50					
Line 13: Expenditures \$50 and under*					
<b>Line 14: TOTAL EXPENDITURES</b>				<b>1127</b>	<b>67</b>

Enter on page 1, line 4

\* If you have itemized expenditures \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized above.

**SCHEDULE B: EXPENDITURES**

*Comm to elect Chuck Turner page 5*

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, CPF ID# and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
10/7/09	Terri Small Turner	Beechqlen St Roy	Reimb	20	50
10/7/09	Terri Small Turner	BEEchqlen St Roy	Reimb	105	00
10/7/09	Terri Small Turner	Beechqlen St Roy	Reimb	4	16
10/15/09	Terri Small Turner	Beechqlen St Roy	Reimb	409	95
2/19/09	Tony Pringle	8 Prescott ST Roxbury	Cleaning	20	00
9/25/09	Verizon	PO Box 1100 Albany NY	Phone	364	39
10/10/09	Verizon	PO Box 1100 ALBANY NY	Phone	369	93
11/17/08	Walgreens	Dudley Sq Roy	Supplies	5	26
9/22/09	Walgreens	Dudley Sq Roy	Supplies	2	61
11/26/08	Walgreens	Dudley Sq Roy	Supplies	2	50
11/26/08	Walgreens	Dudley Sq Roy	Supplies	2	50
1/26/09	Walgreens	Dudley Sq Roy	Supplies	2	99
1/30/09	Walgreens	Dudley Sq Roy	Supplies	9	44
2/22/09	Walgreens	Dudley Sq Roy	Supplies	4	29
2/22/09	Walgreens	Dudley Sq Roy	Supplies	5	00
Line 12: Expenditures over \$50					
Line 13: Expenditures \$50 and under*					
<b>Line 14: TOTAL EXPENDITURES</b>				<b>1328</b>	<b>52</b>

Enter on page 1, line 4

\* If you have itemized expenditures \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized above.



CANDIDATE  
 IOAN DETAIL  
 9/5-10/16/09

7/23/09 Dunkin Donuts	Washington St Rox	meals
8/4/09 Dunkin Donuts	Washington St Rox	meals
8/12/09 Hatoffs	3440 Washington St JP	travel
8/10/09 Home Depot	South bay Ctr Dor	supplies
1/7/09 Post Office		postage
2/9/09 Post Office		postage
8/18/09 Post Office	Roxbury St Rox	postage
8/3/09 Rite Aid	30 River St Matt	supplies
8/25/09 Stash's grill		meals
7/27/09 Stop and Save	310 Blue Hill Av Dor	supplies
2/19/09 Tony Pringle		cleaning
11/17/08 Walgreens		supplies
11/26/08 Walgreens		supplies
11/26/08 Walgreens		supplies
1/26/09 Walgreens		supplies
1/30/09 Walgreens		supplies
2/22/09 Walgreens		supplies
2/22/09 Walgreens		supplies
4/28/09 Walgreens		supplies
7/20/09 Walgreens		supplies
8/4/09 Walgreens		supplies
8/6/09 Walgreens		supplies
8/24/09 Walgreens		supplies
9/26/09 Dell Computer		computer

\$4.01  
 \$3.11  
 \$25.00  
 \$23.71  
 \$8.40  
 \$31.50  
 \$8.40  
 \$12.73  
 \$21.25  
 \$6.55  
 \$20.00  
 \$2.61  
 \$2.50  
 \$2.50  
 \$2.99  
 \$9.44  
 \$4.29  
 \$5.00  
 \$3.66

\$8.90  
 \$9.19  
 \$5.31  
 \$5.31  
 \$30.70

257.06

## 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
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				

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 contributor has given an aggregate amount of \$200 or more in a calendar year, you must also report the contributor's occupation and employer.

## SCHEDULE D: LIABILITIES

*Comm to Elect CHUCK TURNER PAGE 10*  
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
9/5 - 10/16/09	CHARLES TURNER	BEECHGLEN ST ROY	CANDIDATE LOAN CAMPAIGN OFFICE	257.06
				158990.58
Line 18: OUTSTANDING LIABILITIES (ALL)				

Enter on page 1, line 7

This page may be copied if additional pages are required to report all activity. Please include your committee name, CPF ID# and a page number on each page.

## 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
	Jill Stein Doctor	17 Trotting horse Dr Lexington	Food for Event	100.00
3/20/09	DAVID Ludlow Photographer	69 Robeson St J.P	Food for Event	500.00
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
<b>Line 17: Total In-kind</b>				<b>600.00</b>

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 contributor has given an aggregate amount of \$200 or more in a calendar year, you must also report the contributor's occupation and employer.

## SCHEDULE D: LIABILITIES

*Comm to Elect Chuck Turner Page 9*  
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
1/1/08 - 12/31/08	CHARLES TURNER	63 BEECHGLEN ST ROXBURY	Candidate loan office & CAMP	22,817.54
2/13/09	CHARLES TURNER	63 BEECHGLEN ST ROXBURY	Candidate loan office & CAMP	1000.00
1/09 - 9/4/09	CHARLES TURNER	63 Beechglen St Rox	Candidate loan office & camp	11,360.82
<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>				<b>35,208.36</b>

Enter on page 1, line 7

This page may be copied if additional pages are required to report all activity. Please include your committee name, CPF ID# and a page number on each page.

## 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
/				
/				
/				
/				
/				
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				

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.

## SCHEDULE D: LIABILITIES

*Committee to Elect Chuck Turner Page 8*

M.G.L. c. 53 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
9/12/08	Quill	P.O. Box 37600 Phila Pa	Supplies	153.55
10/9/08	Boston Banner	Dryden Ave Boston	Advertisement	200.00
12/08	National Grid	P.O. Box 4300 Woburn	office heat	156.33
12/08	NSTAR	P.O. Box 4508 Woburn	office electricity	115.29
12/18/08	Poland Springs	P.O. Box 56192 Louisville Ky	office water	59.07
Line 18: OUTSTANDING LIABILITIES (ADD)				684.24

Enter on page 1, line 7

## 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
/				
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				

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.

Committee to elect Chuck Turner  
Page 7

## SCHEDULE D: LIABILITIES

MEGLR 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
12/8/08	Quill	PO Box 37600 Phil PA	office supplies	133.21
12/30/08	Reliable Janitorial	74 Crestwood PC Dor	office cleaning	225.00
12/3/08	Reliable Janitorial	74 Crestwood PC Dor	office cleaning	180.00
Line 18: OUTSTANDING LIABILITIES (ALL)				538.21

Enter on page 1, line 7

## 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
See attached				
			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

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.

## SCHEDULE D: LIABILITIES

Committee to Elect Chuck Turner Page 4

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
10/20/07 12/31/07	CHUCKS TURNER	63 BEECHGLEN ST ROXBURY MA	Campaign & District office	\$086.19
				\$86.19
Line 18: OUTSTANDING LIABILITIES (ALL)				

Enter on page 1, line 7

## 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
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				

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.

Comm to elect Chuck Turner pages

## 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
7/24/06	CHARLES TURNER	63 Beech Glen St Roxbury	Campaign & DISTRICT OFFICE	859.45
1/1/06- 12/31/06	CHARLES TURNER	63 BEECHGLEN ST ROXBURY	Campaign & DISTRICT OFFICE	25016.23
1/1/07- 9/1/07	CHARLES TURNER	63 Beech Glen St Rox.	Campaign & DISTRICT OFFICE	8695.93
9/1-07 10/19-07	CHARLES TURNER	63 Beech Glen St Roxbury	CAMPAIGN & DISTRICT OFFICE	5909.85
40481.46				
Line 18: OUTSTANDING LIABILITIES (ALL)				

Enter on page 1, line 7







## 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
/				
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				

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.

## SCHEDULE D: LIABILITIES

*Committee to Elect Chuck Turner* Page 1

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
6/4-12/31/99	Charles Turner	63 Beech Glen St Roxbury	Campaign expen	24971.82
1-1-2000-12/31/2000	Charles Turner	63 Beech Glen St Roxbury	Campaign & District office	7324.99
7/30/2001	Charles Turner	63 Beech Glen St Roxbury	Campaign expenses	2500.00
2/15/2001	Charles Turner	63 Beech Glen St Roxbury	District office expenses	300.00
3/17/2001	Charles Turner	63 Beech Glen St Roxbury	Campaign & District office	1500.00
Line 18: OUTSTANDING LIABILITIES (ALL)				36596.81

Enter on page 1, line 7









## Form CPF R 1 : Itemization of Reimbursements Office of Campaign and Political Finance

Commonwealth  
of Massachusetts

Office of Campaign and Political Finance  
One Ashburton Place  
Boston, MA 02108  
(617) 727-4352

Please print or type all information, except signatures.

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

Name of Individual Being Reimbursed: Charles Turner

Committee Name: Comm to Elect Chuck Turner CPF ID #: \_\_\_\_\_

Amount of Reimbursement: 30.00

Date of Reimbursement: 10/7/09

### ITEMIZE EXPENDITURES IN EXCESS OF \$50

Date Paid	Vendor Name and Address	Purpose of Expenditure	Amount	
8/31/09	Post office Fort Point St	postage permit	30	00
Expenditures in excess of \$50 (listed above)				
Expenditures \$50 and under (not listed above)				
<b>TOTAL AMOUNT REIMBURSED</b>			<b>30</b>	<b>00</b>

Signed under the penalties of perjury:

*Charles Turner*

Corey Small Turner  
Signature of Candidate/Treasurer

Date

10/7/09

Please use a separate sheet for each reimbursement check issued.





















**Form CPF R 1 : Itemization of Reimbursements  
Office of Campaign and Political Finance**

Commonwealth  
of Massachusetts

Office of Campaign and Political Finance  
One Ashburton Place  
Boston, MA 02108  
(617) 727-4332

Please print or type all information, except signatures.

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

Name of Individual Being Reimbursed: Terril Small Turner  
 Committee Name: Comm to Elect Chuck Turner CPF ID #: \_\_\_\_\_  
 Amount of Reimbursement: 20.50  
 Date of Reimbursement: 10/7/09

**ITEMIZE EXPENDITURES IN EXCESS OF \$50**

Date Paid	Vendor Name and Address	Purpose of Expenditure	Amount	
9/18/09	Kennedy Fried Chicken 2360 WASH ST. ROX	food	20	50
Expenditures in excess of \$50 (listed above)				
Expenditures \$50 and under (not listed above)				
<b>TOTAL AMOUNT REIMBURSED</b>			<b>20</b>	<b>50</b>

Signed under the penalties of perjury:

Terril Small Turner 10/7/09  
 Signature of Candidate/Treasurer Date











