

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

UI IYIASSACHUSCUS	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 01/01,	/2023 Ending Date: 10/30/2023
Type of Report: (Check one)	#2 ()
8th day preceding preliminary X 8th day preceding election	30 day after election year-end report dissolution
Paul Levy	Committee to Elect Paul Levy
Candidate Full Name (if applicable)	Committee Name
School Committee Member	Justin Traxler
Office Sought and District	Name of Committee Treasurer
59 Oxford Rd, Newton, MA 02459	59 Oxford Rd, Newton, MA 02459
Residential Address	Committee Mailing Address
E-mail: plevy0808@gmail.com	E-mail: plevy0808@gmail.com
Phone # (optional):	Phone # (optional):
SUMMARY BALANC	F INFORMATION:
Line 1: Ending Balance from previous report	1,304
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	1,304
Line 4: Total expenditures this period (page 5, line	e 14) 461
Line 5: Ending Balance (line 3 minus line 4)	843
Line 6: Total in-kind contributions this period (page	ge 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: The Village Bank	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind c finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign
Signed under the penalties of perfury:	(Treadict's signature)
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	x only)
	best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, 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, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	, in-kind contributions and liabilities for this reporting period and represents the s candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature)  Date: 10/30/2023

#### 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.)

-port are receiped. 1	Please include your committee name and a pa  Name and Residential Address	- be named on co	Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
Date Received	(alphabetical issuing required)	Amount	(IOI CONTRIBUTIONS OF \$200 OF INOTC)
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	The state of the s		
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ine 9: Total Rece	ipts over \$50 (or listed above)		
		17,	1
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL I	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
	RECEIPTS IN THE PERIOD		<u>'</u>

<sup>\*</sup> 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)
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			29
			<b>20</b> 20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
			<b>4</b> 56
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			3 00
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			l N
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:			
Line 9: Total Rece	ipts over \$50 (or listed above)	4744444	
Line 10: Total Reco	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
		e 9 I ine 10 show	Id include only those receipts not itemized above.

<sup>\*</sup> 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
1/3/2023	Google	1600 Amphitheatre Parkway, Mountain View, CA 94043	Web Infrastructure	25.5
1/19/2023	Google	1600 Amphitheatre Parkway, Mountain View, CA 94043	Web Infrastructure	12
2/2/2023	Google	1600 Amphitheatre Parkway, Mountain View, CA 94043	Web Infrastructure	37.5
3/2/2023	Google	1600 Amphitheatre Parkway, Mountain View, CA 94043	Web Infrastructure	25.5
4/3/2023	Google	1600 Amphitheatre Parkway, Mountain View, CA 94043	Web Infrastructure	25.5
5/1/2023	Google	1600 Amphitheatre Parkway, Mountain View, CA 94043	Web Infrastructure	25.5
1/5/2023	WIX.COM	40 Namal, Tel Aviv 6350671, Israel	Web Infrastructure	293.25
1/20/2023	Zoom	55 Almaden Boulevard, Suite 600, San Jose, CA 95113	Video Conference Infrastructure	15.93
		Line 12: Total Expenditures ov 건 : 가 되고 모든 130 8대로	ver \$50 (or listed above)	460.68
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	О
	Enter on page 1. line 4 →	→ Hadio Alio Holmon Line 143 TOTAL EXPENDIT	TURES IN THE PERIOD	460.68

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

Page 4

# SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid	· · · · · · · · · · · · · · · · · · ·		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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			2023	**************************************
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		- PAT - AND		
1				
•		Line 12: Expenditures over \$50	0 (or listed above)	
				<u> </u>
		Line 13: Expenditures \$50 and	under* (not listed above)	
	Enter on page 1 line A →	Line 14: TOTAL EXPENDIT	TIRES IN THE PERIOD	
TO 1 '			hould include only those expenditure	

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

Page 5

### 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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			nea oct	\$ \$ 0.00
		`	\$0 71	O TO
				, , , , , , , , , , , , , , , , , , ,
•				
<del></del> -		Line 15: In-Kind Contributions	over \$50 (or listed above)	
Line 16: In-Kind Contributions \$50 & under (not listed above)				
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	

<sup>\*</sup> 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.

To Whom Due	Address	Purpose	Amount
		Automotive contraction	
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	***************************************		
	To Whom Due	To Whom Due Address  Address	

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