

Form CPF M 102: Campaign Finance Report

RECEIVED Municipal Form

Mawton City Clark

Office of Campaign and Political Finance

2019 MAR 15 PM 2: 00

· · · · · · · · · · · · · · · · · · ·	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: A. O. Beginning Date: Januar	ry 1, 2019 Ending Date: March 15, 2019
The Court (Classes)	
Type of Report: (Check one)	
☐ 8th day preceding preliminary ☐ 8th day preceding election [☐ 30 day after election ☐ year-end report ☒ dissolution
Kathleen C. Marchi	Committee to Elect Kathy Marchi
Candidate Full Name (if applicable)	Committee Name
School Committee, Ward 1	Eileen Ingham
Office Sought and District	Name of Committee Treasurer
25 Rustic Street, Newton, MA 02458	14 Malvern Terrace, Newton, MA 02466
Residential Address	Committee Mailing Address
E-mail: marchi.k@@hotmail.com	E-mail: kathleenmarchi4schoolcommittee@gmail.com
Phone # (optional): (917) 922-6516	Phone # (optional):
SUMMARY BALANCI	E INFORMATION:
Line 1: Ending Balance from previous report	129.88
Line 2: Total receipts this period (page 3, line 11)	o
Line 3: Subtotal (line 1 plus line 2)	129.88
Line 4: Total expenditures this period (page 5, line	e 14) 129.88
Line 5: Ending Balance (line 3 minus line 4)	0
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: Village Bank	
	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: March 15, 2019 k 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,
Candidate without Committee OR Candidate with independent activity filing sep 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	best of my knowledge and belief, a true and complete statement of all campaign, in-kind contributions and liabilities for this reporting period and represents the scommittee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: Vatuleus OMAL	(Candidate's signature) Date: March 15, 2019

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.)

Date Received	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)
		Park to the total	
_			
		1	
ing 0. Total Page	ipts over \$50 (or listed above)		
	eipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		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 (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
]	
	Protection of the second of th		
Shirida			
Line 9: Total Rece	ipts over \$50 (or listed above)		
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
		<u> </u>	Id include only those receipts not itemized shove

^{*} 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.)

		nittee name and a page number	T T	
D 4 D 13	To Whom Paid	Address	Purpose of Expenditure	Amount
Date Paid	(alphabetical listing)	Audress	Fur pose of Expenditure	Amount
2/3/2019	City of Newton, General Fund	1000 Commonwealth Ave, Newton, MA	Donation to dissolve account	129.88
14-15-15-15-15-15-15-15-15-15-15-15-15-15-				
		411.14		
Provide the state of the state				

		Line 12: Total Expenditures	over \$50 (or listed above)	129.88
	·	Line 13: Total Expenditures S	\$50 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPEND	ITURES IN THE PERIOD	129.88

^{*} 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

-				
	The state of the s			
				1
		Line 12: Expenditures over \$5	50 (or listed above)	
Line 13: Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				

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

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
T				
		Line 15: In-Kind Contributions	s over \$50 (or listed above)	
	Line 16: In-Kind Contributions \$50 & under (not listed above)			
	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			

^{*} 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.

Date Incurred	To Whom Due	Address	Purpose	Amount
		1		
	Management of the second of th			Management
		-		
		Line 18: TOTAL OUTSTAN		