



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/19 Ending Date: 10/28/19

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Tamika Olszewski
Candidate Full Name (if applicable)

School Committee, Ward 4
Office Sought and District

341 Lexington St., Auburndale, MA 02466
Residential Address

E-mail: tamika4schools@gmail.com

Phone # (optional): _____

Committee to Elect Tamika Olszewski
Committee Name

Laura Towvim
Name of Committee Treasurer

341 Lexington St., Auburndale, MA 02466
Committee Mailing Address

E-mail: tamika4schools@gmail.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$528.27
Line 2: Total receipts this period (page 3, line 11)	\$981.6
Line 3: Subtotal (line 1 plus line 2)	\$10,344.27
Line 4: Total expenditures this period (page 5, line 14)	\$9719.26
Line 5: Ending Balance (line 3 minus line 4)	\$625.01
Line 6: Total in-kind contributions this period (page 6)	\$85
Line 7: Total (all) outstanding liabilities (page 7)	\$1418.27
Line 8: Name of bank(s) used:	The Village Bank, 307 Auburn St., Auburndale, MA 02466

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: Laura Towvim (Treasurer's signature) Date: 10/28/19

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.

Tamika Olszewski (Candidate's signature) Date: 10/28/19



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

2019 OCT 28 PM 5:24

Fill in Reporting Period dates: Beginning Date: 1/1/19 Ending Date: 10/28/19

Type of Report: (Check one)

8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Tamika Olszewski
Candidate Full Name (if applicable)

School Committee, Ward 4
Office Sought and District

341 Lexington St., Auburndale, MA 02466
Residential Address

E-mail: tamika4schools@gmail.com

Phone # (optional): _____

Committee to Elect Tamika Olszewski
Committee Name

Laura Towvim
Name of Committee Treasurer

341 Lexington St., Auburndale, MA 02466
Committee Mailing Address

E-mail: tamika4schools@gmail.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$528.27
Line 2: Total receipts this period (page 3, line 11)	\$9816
Line 3: Subtotal (line 1 plus line 2)	\$10,344.27
Line 4: Total expenditures this period (page 5, line 14)	\$9719.26
Line 5: Ending Balance (line 3 minus line 4)	\$625.01
Line 6: Total in-kind contributions this period (page 6)	\$85
Line 7: Total (all) outstanding liabilities (page 7)	\$1418.27
Line 8: Name of bank(s) used:	The Village Bank, 307 Auburn St., Auburndale, MA 02466

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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: Laura Towvim (Treasurer's signature) Date: 10/28/19

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: _____ (Candidate's signature) Date: 10/28/19

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)
10/20/19	Caroline Bell 235 Adams Ave. West Newton MA 02465	\$25	
8/27/19	Deborah Benik 65 Jane Rd. Newton, MA 02459	\$100	
1/27/19	Meredith Berg 231 Melrose St. Auburndale, MA 02466	\$25	
9/24/19	Kate Carpenter Bernier 67 Prescott St. Newton, MA 02460	\$100	
2/3/19	Melissa Bernstein 17 Chatham Road Newton, MA 02461	\$100	Artistic Director Newton Theatre Company
9/8/19	Meliss Bernstein 17 Chatham Road Newton, MA 02461	\$100	Artistic Director Newton Theatre Company
10/25/19	Meliss Bernstein 17 Chatham Road Newton, MA 02461	\$100	Artistic Director Newton Theatre Company
1/27/19	Allison Berry 42 Clarendon Street Newton, MA 02460	\$50	
9/8/19	Pia Bertelli 31 Locke Road Waban, MA 02468	\$50	
1/24/19	Katie Biello 472 Wolcott Street Auburndale, MA 02466	\$50	
10/25/19	Katie Biello 472 Wolcott Street Auburndale, MA 02466	\$25	
9/8/19	John Birnstengel 55 Wheeler Rd Newton, MA 02459	\$20	
Line 9: Total Receipts over \$50 (or listed above)		[]	
Line 10: Total Receipts \$50 and under* (not listed above)		[]	
Line 11: TOTAL 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)
10/27/19	Alicia Bowman 19 Chestnut Terrace Newton, MA 02459	\$100	
10/22/19	Gorham Brigham 401 Cherry Street West Newton, MA 02465	\$100	
1/27/19	Johanna Brooks 326 River Street West Newton, MA 02465	\$50	
2/3/19	Angela Brooks 5 Marshall Street Newton, MA 02459	\$100	
8/25/19	Michelle Brown 18 Prospect Street Apt. A4 Norwalk, CT 06850	\$50	
10/25/19	Joanna Burleson 48 Swallow Drive Newton, MA 02462	\$25	
1/27/19	Alison Callahan 11 Virginia Road Newton, MA 02466	\$40	
10/6/19	Melissa Chu 21 Turner Street Newton, MA 02460	\$100	
10/20/19	Amy Cook 400 Ward St. Newton Center, MA 02459	\$25	
9/8/19	Yasmin Dalton 74 West Pine St Auburndale, MA 02466	\$50	
10/25/19	Susan Davidoff 24 Bridge St. Newton, MA 02458	\$200	Not Employed None
9/15/19	Brant Davis 454 Wolcott St. Auburndale, MA 02466	\$200	Consultant SourceOne
9/22/19	Patricia Devaney 7 Crown Street Auburndale, MA 02466	\$200	Consultant Sel Employed
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL 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

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8/4/19	Christine Dutt 13 Crescent Street West Newton, MA 02465	\$25	
10/26/19	Natalia Espinal 423 Albemarle Road Newton, MA 02460	\$25	
9/24/19	Laura Farnsworth 73 Perkins St West. Newton, MA 02465	\$100	
2/17/19	Greta Feinberg 418 Wolcott St Auburndale, MA 02466	\$100	
1/27/19	Dan Finkelstein 150 Melrose St Auburndale, MA 02466	\$50	
5/5/19	Brenna Fisk 64 Elm St West Newton, MA 02465	\$100	
9/22/19	Newell Flather 334 Oris St. West Newton, MA 02465	\$150	
6/9/19	Jennifer Fries 13 1/2 Cedar St Cambridge, MA 02140	\$25	
1/27/19	Carey Gacioch 1717 East Capitol St SE Apt 232 Washington, DC 02003	\$100	
10/25/19	Carey Gacioch 1717 East Capitol St SE Apt 232 Washington, DC 02003	\$50	
7/10/19	Rob Gifford 41 Oxford Rd. Newton, MA 02459	\$250	Investment Advisor Self Employed
3/18/19	Fran Godine 19 Crofton Rd. Waban, MA 02466	\$250	Not Employed None
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL 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)
9/29/19	Marion Golin 178 PRINCE ST. WEST NEWTON, MA 02465	\$100	
1/24/19	Diana Gomberg 290 Islington Rd. Newton, MA 02466	\$200	
6/9/19	Rachel Gordon 10 Eastern Ave. Greenfield, MA 01301	\$25	
9/22/19	StevenGrossman 30 Huntington Rd Newton, MA 20458	\$100	
9/25/19	Lizbeth Heyer 25Freeman St. Newton, MA 02466	\$100	
9/15/19	Matt Hills 25 HOBART RD NEWTON CENTER, MA 02459	\$100	
10/27/19	Gena Hooper 128 Dane Hill Rd Newton, MA 02461	\$50	
2/10/19	Jill Hwang 19 Rebecca Rd. WEST NEWTON, MA 02465	\$100	
5/5/19	Judith Jacobson 289 Cypress Street Newton, MA 02459	\$50	
9/16/19	Robert Jampol 17 Upland Rd. Waban, MA 02466	\$50	
10/25/19	Wei Jiang 335 Lexington Street Auburndale, MA 02466	\$50	
2/11/19	Laura Johnson 33 Washington St. Newton, MA 02458	\$100	
9/8/19	Anne Josephson 53 Greenlawn Avenue Newton Center, MA 02459	\$75	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL 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

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)
9/20/19	Felicia Khan 27 Kingman Rd. Newton, MA 02461	\$50	
10/23/19	DELORES KIMMEL 39 FREEMAN ST Auburndale, MA 02466	\$100	
10/25/19	Adrienne Knudsen 74 Vista Ave Auburndale, MA 02466	\$100	
9/24/19	Ken Krems 55 St. Marys St. Newton, MA 02462	\$100	
9/22/19	Renee Krikorian 21 Webster St Newton, MA 02465	\$100	
8/18/19	Anne Larner 68 Myrtle Street W Newton, MA 02465	\$200	Not Employed Not Employed
2/24/19	Elissa Lazarski 212 Newfield Rd Syracuse, NY 13214	\$50	
9/29/19	Jongwoo Lee 75 Great Meadow Rd Newton, MA 02459	\$50	
9/15/19	Mitchell Lyons 20 Hope Street Newton, MA 02466	\$300	Not Employed Not Employed
9/1/19	Pamela Madziarz 7970 Sackett Road Bergen, NY 14416	\$75	
9/24/19	Joan McGrath 1617 Washington St. Newton, MA 02465	\$25	
9/21/19	Madeline Mcneely 68 Jewlett St. Newton, MA 02458	\$100	
Line 9: Total Receipts over \$50 (or listed above)		[]	
Line 10: Total Receipts \$50 and under* (not listed above)		[]	
Line 11: TOTAL 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)
8/19/19	Ruth-Ann Mendel 155 Del Pond Dr. Canton, MA 02021	\$25	
8/19/19	Committee to Elect Matthew Miller Newton, MA	\$100	
10/20/19	Lisa Monahan 1105 Walnut Street Newton, MA 02461	\$50	
3/10/19	Eilene Moore 1133 Squire Lane Farmington, NY 14425	\$200	Not Employed Not Employed
9/8/19	Eilene Moore 1133 Squire Lane Farmington, NY 14425	\$100	Not Employed Not Employed
3/10/19	Chau Nguyen 235 Melrose Street Auburndale, MA 02466	\$150	
2/10/19	Michele Olszewski 521 Rehill Court River Vale, NJ 07675	\$50	
3/24/19	Rose Olszewski 64 University Road Brookline, MA 02445	\$200	Physical therapist Aveanna
3/31/19	Marianna Olszewski 480 Park Ave Apt 6C New York, NY 10022	\$75	
7/12/19	Sandra Olszewski 175 Greco Ln Mount Carmel, PA 17851	\$25	
5/10/19	Theresa Olszewski Boras 201 Marin BLVD. #7060 Jersey City, NJ 07302	\$200	Marketing Executive Hulu
9/8/19	Lisa Pagana 383 Lexington St Auburndale, MA 02466	\$25	
9/8/19	Robert Parlin 25 Kelly Rd. #2 Cambridge, MA 02139	\$25	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL 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

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
1/27/19	David Poras 11 Cumberland Rd. Newton, MA 02465	\$150	
7/8/19	Kerry Prasad 22 Howe Rd. Newton Center, MA 02459	150	
	Brenda Pring 158 Auburndale Ave Newton, MA 02465	\$100	
9/15/19	Hema Rao 73 Washburn Ave Auburndale, MA 02466	\$50	
9/1/19	Ashia Ray 185 Christina st. Newton, MA 02461	\$15	
8/25/19	Bridget Ray-Canada 152 Pearl Street Unit 2 Newton, MA 02458	\$100	
6/5/19	Stacey Richard 2069 Commonwealth Ave. Auburndale, MA 02466	\$250	Math Coach Newton Public Schools
9/21/19	Helen Rousseau 86 Prescott St. Newton, MA 02460	\$50	
2/10/19	Eileen Sandberg 414 Waltham st Newton, MA 02465	\$200	Not Employed Not Employed
8/18/19	Karie Shaw 1133 Squire Lane Farmington, NY 14425	\$200	Educator Rochester City School District
6/16/19	Kathleen Shields 55 Hobart Rd Newton, MA 02459	\$50	
9/8/19	Ann Smith 593 Mill St. Fishers, NY 14453	\$50	

Line 9: Total Receipts over \$50 (or listed above) Line 10: Total Receipts \$50 and under* (not listed above) **Line 11: TOTAL 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)
	Dale Smith 20 Seton Hill Road Auburndale, MA 02466	\$50	
3/18/19	Claire Sokoloff 41 Oxford Rd. NEWTON CENTER, MA 02459	\$250	Not Employed Not Employed
6/9/19	Naiara Souto 4 Summit Drive apt 419 Reading, MA 01867	\$10	
1/27/19	Andrea Steenstrup 21 Kimball Terrace Newton, MA 02460	\$75	
9/22/19	John Stewart 23 Pierrepont Road Newton, MA 02462 9/22/19	\$100	
9/29/19	Paul Stewart 98 Beethoven Ave Newton, MA 02468	\$50	
1/24/19	Heyman Susan 70 Varick Rd. Waban, MA 02468	\$250	Not Employed Not Employed
1/27/19	Marcia Tabenken 11 North St. Newton, MA 02460	\$50	
2/17/19	Nadine Thompson 3 Glenmore Terrace Unit 2 Newton Highlands, MA 02461	\$100	
1/27/19	Laura Towvim 61 Islington Road Newton, MA 02466	\$100	
1/29/19	Janhavi Wadhvani 297 Lexington St. Auburndale, MA 02466	\$200	
3/31/19	Robert Warming 36 St Mary's St Newton, MA 02462	\$25	
2/7/19	Jean Weinberg 124 Staniford St. Auburndale, MA 02466	\$200	
Line 9: Total Receipts over \$50 (or listed above)		<input type="text"/>	
Line 10: Total Receipts \$50 and under* (not listed above)		<input type="text"/>	
Line 11: TOTAL RECEIPTS IN THE PERIOD		<input type="text"/>	← 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

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
1/27/19	Erika Welch 67 Hancock St Auburndale, MA 02466	\$100	
10/25/19	Sally Weylman 39 Nonantum St. Newton, MA 02458	\$10	
10/25/19	Jess Wilson 970 Dedham St Newton, MA 02459	\$10	
5/12/19	Terry Yoffie 363 Waverley Avenue Newton, MA 02458	\$50	
10/25/19	Esther Zaff 194 Upland Avenue Newton, MA 02461	\$36	
Line 9: Total Receipts over \$50 (or listed above)		\$9816	
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$9816	← 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

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
1/25/19	Blue Chicken Design	25 Prairie Ave. Auburndale, MA 02466	Logo & Design Work	\$375.00
9/3/19	Blue Chicken Design	25 Prairie Ave. Auburndale, MA 02466	Logo & Design Work	\$412.50
2/28/19	ELButtons	24825 N. 16th Ave., Suite 100 Phoenix, AZ 85085	Campaign Buttons	\$57.90
1/25/19	Emerge Massachusetts	15 Court Square, #900 Boston, MA 02108	Candidate Training	\$250.00
2/25/19	Emerge Massachusetts	15 Court Square, #900 Boston, MA 02108	Candidate Training	\$250.00
3/25/19	Emerge Massachusetts	15 Court Square, #900 Boston, MA 02108	Candidate Training	\$250.00
6/1/19	Emerge Massachusetts	15 Court Square, #900 Boston, MA 02108	Candidate Training	\$250.00
3/20/19	Mass Democratic Party	11 Beacon St, Suite 410, Boston, MA 02108	VoteBuilder	\$1,500.00
3/29/19	Potter's Printing Inc.	822 Eastern Ave. Fall River, MA 02723	Printing Service	\$152.08
3/29/19	Potter's Printing Inc.	822 Eastern Ave. Fall River, MA 02723	Printing Service	\$167.26
7/20/19	Potter's Printing Inc.	822 Eastern Ave. Fall River, MA 02723	Printing Service	\$270.77
9/20/19	Potter's Printing Inc.	822 Eastern Ave. Fall River, MA 02723	Printing Service	\$1150.60
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total 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 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
12/8/18	Squarespace, Inc.	225 Varick St., 12th Floor New York, NY 10014	Annual Website Hosting Fee	\$137.70
12/19/18	Tamika Olszewski	341 Lexington St. Auburndale, MA 02466	Initial Bank Deposit	\$200.00
9/25/19	Tamika Olszewski	341 Lexington St. Auburndale, MA 02466	Sign Posts Materials & Labels	60.57
10/28/19	Blue Chicken Design	25 Prairie Ave. Auburndale, MA 02466	Logo & Design Work	\$1,020
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	\$1418.27