

# Form CPF M 102: Campaign Finance Report Municipal Form

RECEIVED Howton City Clark

Office of Campaign and Political Finance

of Massachusett	s 2019 JAN 11					File with: City of	or Town Clerk	k or Electior	a Commission
Fill in Rep	orting Period dates:	AM 10: 53 Beginning Date: 1/01	/201	8	Ending l		1/2018		
•	David a ru	FOR CARE	**********						
Type of Re	eport: (Check one)	AODAFA							
8th day p	preceding preliminary	☐ 8th day preceding election		] 30 day	after election	🔀 year-en	ıd report	disso	olution
			<b>7</b> [						
Matthew Brian	n Miller			Committe	eto Elect Matthe	w Miller			
	Candidate Full Nan	ne (if applicable)				Committee N	lame		
School Comm	nittee Member, Ward 8 Office Sought	and District	-	Claudia E		me of Committe	e Treasurer		
26 Shute Path	n, Newton, MA 02459			26 Shute	Path, Newton,				
	Residential	Address	_		C	ommittee Mailin	g Address		
E-mail:	matthew@m	natt4schools.com	-	E-mail:		claudia3680	⊉gmail.com		
Phone # (option	nal);	617-394-8833	-	Phone # (o	ptional):	97	78-790-1790	)	
		MATERIAL STATE OF THE STATE OF							
		SUMMARY BALAN	CE	INFO	RMATION:				
	Line 1: Ending Ba	alance from previous report					275.3	36	
								<b>-</b>	
	Line 2: Total rece	eipts this period (page 3, line 11	1)		***************************************		3,019.0	00]	
	Line 3: Subtotal (	line 1 plus line 2)				WWW.CO-PHILIPPEN CO.	3,294.0	36	
	,	,						╣	
	Line 4: Total expe	enditures this period (page 5, li	ine	14)			665.	37	
	Line 5: Ending Ba	alance (line 3 minus line 4)					2,628.9	99	
							DAUS ALL STATE OF THE STATE OF	=	
	Line 6: Total in-k	ind contributions this period (p	page	e 6)			70.0	08	
	Line 7: Total (all)	outstanding liabilities (page 7	<b>'</b> )				0.4	00	
	Line 8: Name of b	bank(s) used: The Village Bank							
L 664	mmittee Treasurer:								
I certify that I has activity, including finance activity	ave examined this report inclu ng all contributions, loans, rec	nding attached schedules and it is, to the be ceipts, expenditures, disbursements, in-kine e authority or on behalf of this committee i	id cor	ntributions a	and liabilities for the ith the requirements	is reporting perio	d and represe		
FOR CAND	DIDATE FILINGS ON	LY: Affidavit of Candidate: (check 1 l	box (	only)					
I certify the activity, of	at I have examined this report all persons acting under the a	ivity independent of the committee including attached schedules and it is, to t authority or on behalf of this committee in a penditures on my behalf during this reporting	ассо	rdance with	nowledge and belied the requirements o	f, a true and comp f M.G.L. c. 55. l	plete statemer have not rec	nt of all cam eived any co	paign finance ontributions,
I certify the	at I have examined this report ivity, including contributions,	ndidate with independent activity filing including attached schedules and it is, to t loans, receipts, expenditures, disbursemer acting under the authority or on behalf of t	the b	est of my ki n-kind cont	nowledge and belies ributions and liabili	ties for this repor	rting period an of M.G.L. c. :	nd represent 55.	ipaign is the
Signed under t	he penalties of perjury:	KY		=-	(Candidate	e's signature)	Date: 1	1/082019	

#### **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.)

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
9/13/2018	DebraChionchio 696 Dedham Street Newton, MA 02459	78.00	
)/15/2018	Jianmei Fan 8 Avery Path Newton, MA 02459	100.00	
/15/2018	Diana Fisher Gomberg 290 Islington Road Newton, MA 02466	100.00	
0/15/2018	Shawn Fitzgibbons 300 Homer Street Newton, MA 02459	100.00	
9/28/2018	Julie Gollob 69 Cross Hill Road Newton, MA 02459	75.00	
9/15/2018	Beth Lewis Hicks 156 Hammond Street Chestnut Hill, MA 02467	100.00	
9/15/2018	Karen Manning 59 Kirkstall Road Newton, MA 02460	78.00	
9/14/2018	Irene Margolin Katz 19 Rolling Lane Chestnut Hill, MA 02467	100.00	
9/16/2018	Tamika Olszewski 41 Lexington Street Newton, MA 02466	100.00	
8/17/2018	Jeffrey Pontiff 27 Waban Hill Road Newton, MA 02467	80.00	
9/15/2018	Kerry Prasad 22 Howe Road Newton Center, MA 02459	78.00	
9/15/2018	Emily Prenner 702 Chestnut Street Waban, MA 02468	100.00	
Line 9: Total Rec	eipts over \$50 (or listed above)		
Line 10: Total Rec	ceipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<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)**

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
	Margie Ross Decter 20 Vine Street		
9/12/2018	Chestnut Hill, MA 02467	100.00	
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HOTELS - LAWRENCE TO THE STATE OF THE STATE			
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Line 9: Total Rec	eeipts over \$50 (or listed above)	1,189.00	
Y 10 CT ( 15)	φερ απ. d d d d d	1,830.00	
Line 10: Total Re	ceipts \$50 and under* (not listed above)	1,030.00	
Line 11: TOTAI	RECEIPTS IN THE PERIOD	3,019.00	← Enter on page 1, line 2
			d 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

	ditures. Please include your com  To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Date I alu	Committeeto Elect Bryan Barash	167 Lowell Ave. #1	Campaign Contribution	
10/00/0048	Committeeto Elect Bryan Darasii	Newton, MA 02460		100.00
0/09/2018	1			
	Newton Schools Foundation	100 Walnut Street Newton, MA 02460	Donation	
0/09/2018				111.00
				<u> </u>
	The Social Restaurant & Bar	320 Washington Street	Food for Fundraiser	
9/15/2018		Newton, MA 02458	,	375.00
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		Line 12: Total Expenditur	res over \$50 (or listed above)	586.0
		Line 13: Total Expenditure	es \$50 and under* (not listed above)	79.3
	Finter on page 1 line 4	→ Line 14: TOTAL EXPEN	NDITURES IN THE PERIOD	665.3
			e 13 should include only those expenditur	<u> </u>

<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.

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## SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Paid	(athuanctical usung)	Address	Turpose of Expenditure	
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		'		
	The state of the s			
		The state of the s		
		Line 12: Expenditures over	\$50 (or listed above)	
		Line 13: Expenditures \$50	and under* (not listed above)	
	Enter on mass 1 line 4	Line 14: TOTAL EXPEN	DITURES IN THE PERIOD	
		•	13 should include only those expenditu	

<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.

### 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
1/25/2018	Claudia Bowman	161 Lowell Ave, #2 Newton, MA 02460	USPS Postage	4.45
9/17/2018	Matthew Miller	26 Shute Path Newton, MA 02459	Go Daddy Website	30.34
9/28/2018	Matthew Miller	26 Shute Path Newton, MA 02459	Campaign Meeting at Panera	7.79
12/10/2019	Matthew Miller	26 Shute Path Newton, MA 02459	Stamps	27.50
				44-444
And a service of the				
		Line 15: In-Kind Contribut	ions over \$50 (or listed above)	70.08
		Line 16: In-Kind Contribution	ons \$50 & under (not listed above)	
	Enter on page 1 line 6	→ Line 17: TOTAL IN-KINI	O CONTRIBUTIONS	70.0

<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.

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### **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
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				**************************************

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