

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth of Massachusetts	19 JAN 22 P 1: 54		File	with: City or Town Cler	rk or Election Commission
Fill in Reporting	Period dates: Y Beginning Date: 12/19/2	2018	Ending Date		
Type of Report:	(Check one)				
8th day preceding		☐ 30 day	y after election	year-end report	dissolution
Tamika Olszewski	Candidate Full Name (if applicable)	Commit	tee to Elect Tamika Ols	zewski Committee Name	
School Committee, Wa		Laura Te		Sommero Panio	
30,100, 3011111100,	Office Sought and District		Name	of Committee Treasurer	
341 Lexington St., Aut	ourndale, MA 02466	341 Lex	ington St., Auburndale,		
	Residential Address			nittee Mailing Address	
E-mail:	tamika4schools@gmail.com	E-mail:	tar	nika4schools@gmail.c	om
Phone # (optional):		Phone #	(optional):		
	SUMMARY BALANC	E INFO	PRMATION:		
Lin	e 1: Ending Balance from previous report				O
Lin	e 2: Total receipts this period (page 3, line 11)			\$550	0.00
Lin	e 3: Subtotal (line 1 plus line 2)			\$550	0.00
Lin	e 4: Total expenditures this period (page 5, lin	e 14)		\$21	1.73
Lin	e 5: Ending Balance (line 3 minus line 4)			\$528	3.27
Lin	e 6: Total in-kind contributions this period (pa	ge 6)			d l
Lin	e 7: Total (all) outstanding liabilities (page 7)			\$712	2.70
Lin	e 8: Name of bank(s) used: The Village Bank, 307	Auburn St.,	Auburndale, MA 02466	6	
activity, including all cor	ined this report including attached schedules and it is, to the best utributions, loans, receipts, expenditures, disbursements, in-kind of sons acting under the authority or on behalf of this committee in	contributions	s and liabilities for this re	porting period and repres M.G.L. c. 55.	all campaign finance sents the campaign
•			(21000000000000000000000000000000000000		
Candidate with Co I certify that I have activity, of all perso incurred any liability Candidate without I certify that I have finance activity, inc	mmittee and no activity independent of the committee examined this report including attached schedules and it is, to the ns acting under the authority or on behalf of this committee in ac ies nor made any expenditures on my behalf during this reporting Committee OR Candidate with independent activity filing se examined this report including attached schedules and it is, to the luding contributions, loans, receipts, expenditures, disbursements civity of all persons acting under the authority or on behalf of this	best of my cordance wi period. parate repo best of my	th the requirements of M. ort knowledge and belief, a totality the state of the s	G.L. c. 55. I have not re rue and complete stateme for this reporting period a	ceived any contributions, ent of all campaign and represents the
Signed under the penal	ties of perjury: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	. 1	(Candidate's si	gnature)	11

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)
2/19/2018	Becca Schulman 12 Wachusett Rd. Chestnut Hill, MA 02467	\$500.00	Real Estate Developer Beach Plum Properties
2/21/2018	Brant Davis 454 Wolcott St. Auburndale, MA 02466	\$50.00	Consultant SourceOne, Inc.
Line 9: Total Reco	cipts over \$50 (or listed above)	\$550.00	
	eipts \$50 and under* (not listed above)	0	
ine 11: TOTAL	RECEIPTS IN THE PERIOD	\$550.00	← 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 (continued)

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
			,
7.7.2			
] [
] [
Line 9: Total Reco	eipts over \$50 (or listed above)		
Line 10: Total Rec	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD	Manual Ma	← Enter on page 1, line 2
* If you have itemize	ed receipts of \$50 and under, include them in lir	ne 9. Line 10 shoul	d include only those receipts not itemized above.

Page 3

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.)

	To Whom Paid	A 11	A •
Date Paid	(alphabetical listing)	Address Purpose of Expenditure	Amount
		7	
			<u>L</u>
		<u> </u>	
		Line 12: Total Expenditures over \$50 (or listed above)	
		Line 13: Total Expenditures \$50 and under* (not listed above)	\$2
	Dutan an mars 1 12mm 4 3	Line 14: TOTAL EXPENDITURES IN THE PERIOD	\$2
		er, include them in line 12. Line 13 should include only those expenditure	<u> </u>

* 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	
19-3/14-17					
] [
		Line 12: Expenditures over \$5	0 (or listed above)		
	Line 13: Expenditures \$50 and under* (not listed above)				
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES 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
,				
	0.0000000000000000000000000000000000000			
		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 → 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
12/8/18	Squarespace, Inc.	225 Varick St., 12th Floor New York, NY 10014	Annual Website Hosting Fee	\$137.70
2/13/18	Bill Doran	25 Prairie Ave. Auburndale, MA 02466	Logo Design	\$375.00
2/19/18	Tamika Olszewski	341 Lexington St. Auburndale, MA 02466	Initial Bank Deposit	\$200.00
	Enton on maga 1 1ia - 7	→ Line 18: TOTAL OUTCT	ANDING LIABILITIES (ALL)	\$712.70