

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report Municipal Form

BOARD OF ELECTION COMMISSISTERS Office of Campaign and Political Finance

of Massachusetts 2011 IAN 24 A 8: 47	File with: City or Town Clerk or Election Commission	
Fill in Reporting Period dates: Beginning Date: 01/01		
Type of Report: (Check one)		
☐ 8th day preceding preliminary ☐ 8th day preceding election	☐ 30 day after election	
Candidate Full Name (if applicable)	Committee to Elect Diana Gomberg Committee Name	
	Denise A. Chicoine	
Office Sought and District	Name of Committee Treasurer	
Residential Address	290 Islingtion Road	
E-mail:	Committee Mailing Address E-mail: dfgomberg@gmail.com	
Phone # (optional):		
Thone # (optional).	Phone # (optional):	
SUMMARY BALANC	E INFORMATION:	
Line 1: Ending Balance from previous report	\$1,065.63	
Line 2: Total receipts this period (page 3, line 11)	0	
Line 3: Subtotal (line 1 plus line 2)	1065.63	
Line 4: Total expenditures this period (page 5, line	2 14) 30.00	
Line 5: Ending Balance (line 3 minus line 4)	1035.63	
Line 6: Total in-kind contributions this period (page	ge 6)	
Line 7: Total (all) outstanding liabilities (page 7)		
Line 8: Name of bank(s) used: Village Bank, Auburn	dale	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind continuous activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:	ontributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 1/20/17	
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box Candidate with Committee and no activity independent of the committee	s only)	
I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in acc incurred any liabilities nor made any expenditures on my behalf during this reporting	best of my knowledge and belief, a true and complete statement of all campaign finance ordance with the requirements of M.G.L. c. 55. I have not received any contributions, period.	
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	

(Candidate's signature)

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)	nmittee name and a page number of Address	Purpose of Expenditure	Amount
05/14/16 Newton Lower Falls Improvement Association	Newton Lower Falls		Falls Ball donation	30.00
	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 EXPENDIT	TURES IN THE PERIOD	30.00

^{*} 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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