



2017 JAN | Form SPF M 102: Campaign Finance Report **Municipal Form**

NEWTON, MASS

Office of Campaign and Political Finance

of Massachusetts		Fi	le with: City or	Town Clerk	or Election Commission
Fill in Reporting Period dates: Beginning Date: 4/01/2	2016	Ending D	ate: 12/31/	/2016	
Type of Report: (Check one) [] 8th day preceding preliminary [] 8th day preceding election	30 day a	after election	🔀 year-end	l report	dissolution
Matthew Brian Miller Candidate Full Name (if applicable) School Committee Member, Ward 8 Office Sought and District 26 Shute Path, Newton, MA 02459 Residential Address E-mail: mmiller942@gmail.com Phone # (optional):	Claudia B	Nam Path, Newton, MA Cou	Committee Name of Committee 702459 mmittee Mailing claudia368@	Treasurer	
SUMMARY BALANC	CE INFOR	RMATION:	-		
Line 1: Ending Balance from previous report				\$(5
Line 2: Total receipts this period (page 3, line 11	.) [\$2013.0	2
Line 3: Subtotal (line 1 plus line 2)				\$2013.0	2
Line 4: Total expenditures this period (page 5, li	ne 14)			\$1,089.7	8
Line 5: Ending Balance (line 3 minus line 4)	La company		The state of the s	\$923.2	4
Line 6: Total in-kind contributions this period (p	page 6)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$	
Line 7: Total (all) outstanding liabilities (page 7))	100 per 110 pe		\$	
Line 8: Name of bank(s) used: Village Bank					
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-king finance activity of all persons acting under the authority or on behalf of this committee i Signed under the penalties of perjury:	d contributions a	nd liabilities for this	reporting period of M.G.L. c. 55.	tatement of all and represen	its the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 h	box only)		****		
Condidate 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 activity, of all persons acting under the authority or on behalf of this committee in a incurred any liabilities nor made any expenditures on my behalf during this reporting	he best of my kn accordance with ng period.	the requirements of	a true and compl M.G.L. c. 55. 11	lete statement have not rece	of all campaign finance ived any contributions,
Candidate without Committee OR Candidate with independent activity filing I certify that I have examined this report including attached schedules and it is, to t finance activity, including contributions, loans, receipts, expenditures, disbursemer campaign finance activity of all persons acting under the authority or on behalf of t	the best of my kn nts, in-kind contr	owledge and belief, ibutions and liabiliti	ies for this report	ing period an f M.G.L. c. 5	d represents the 5.
Signed under the penalties of perjury:		(Candidate	s signature)	Date:	1/18/17

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	A 4	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	(10r contributions of \$200 of more)
2/27/2016	Allen, Jo-Louis 24 Indiana Terrace Newton Upper Falls, MA 02464	\$50.00	
0/26/2016	Attias, Debbie 37 Jewel St #3L Brooklyn, NY 11222	\$25.00	
0/27/2016	Boudrow, Robert 180 Dewitt Drive Alton, NH 03805	\$350.00	IT Consultant Price Waterhouse Cooper
1/7/2016	Edrington, James 6725 Parsons Ave Baltimore, MD 21215	\$20.00	Sr. Director of Principal Gifts Mass General Hospital
1/22/2016	Fitzgibbons, Shawn 300 Homer Street Newton, MA 02459	\$200.00	
10/27/2016	Hernandez, Magdalena 51 Landseer Street Boston, MA 02132	\$50.00	
10/26/2016	Levering, Kimery 29 Taylor Ave, Apt 3 Poughkeepsie, NY 12601	\$50.00	
11/3/2016	Maier, Abby 1166 Libby Road St. Johnsbury, VT 05819	\$50.00	
12/30/2016	Margolin-Katz, Irene 19 Rolling Lane Chestnut Hill, MA 02467	\$100.00	
10/15/2016	Miller, Matthew 26 Shute Path Newton, MA 02459	\$40.00	
12/28/2016	Miller, Sylvia 7864 SW 106 Ave Miami, FL 33173	\$100.00	
12/31/2016	Palmer, Denise 6376 Highlands in the Woods Ave Lakeland, FL 33813	\$50.00	
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	\$2013.02	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)
12/31/2016	Prenner, Emily 702 Chestnut Street Waban, MA 02468	\$100.00	
10/26/2016	Rosenbaum, Emily 80 Cross Road Stowe, VT 05672	\$50.00	
11/7/2016	Rosenthall, Susan 20 Arch Street Needham, MA 02492	\$75.00	
12/28/2016	Singer, Michael 241 Nahanton Street Newton, MA 02459	\$100.00	
12/27/2016	Tabenken, Marcia 11 North Street Newton, MA 02460	\$50.00	
10/29/2016	Walton, Sulynn 105 Van Dyke Road Strafford, VT 05072	\$500.00	Head of Operations Lock and Lube, Inc.
Line 9: Total Rec	eipts over \$50 (or listed above)	\$1960.00	
	ceipts \$50 and under* (not listed above)	\$53.02	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	\$2013.02	← 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
6/22/2016	Brewers Coalition	344 Walnut Street Newtonville, MA 02460	Dinner meeting	\$62.30
7/14/2016	Cook.	825 Washington Street Newton, MA 02460	Dinner meeting	\$61.36
8/8/2016	Maureen Precopio Design	346 Belknap Road Framingham, MA 01701	Logo & Website Design	\$305.00
7/19/2016	Photography by Drew	70 Langley Road Newton Centre, MA 02459	Photoshoot	\$170.00
6/15/2016	West Street Tavern & Restaurant	7 West Street Newton, MA 02458	Dinner meeting	\$67.43
Parking 1999 (1999)				
	1	Line 12: Total Expenditur	es over \$50 (or listed above)	\$666.09
			es \$50 and under* (not listed above)	\$423.6
	Enter on page 1, line 4 –	Line 14: TOTAL EXPEN	DITURES IN THE PERIOD	\$1,089.7

^{*} 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				
***************************************				***************************************				
77-77-77-77-77-77-77-77-77-77-77-77-77-	and the state of t	Value of the state						
				Marie 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
		Line 12: Expenditures over \$50	0 (or listed above)	POTTO 2 2 11 12 11				
	Line 13: Expenditures \$50 and under* (not listed above)							
	Enter on page 1, line 4 →			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				

^{*} 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
[Line 15: In-Kind Contribution	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C	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.

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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
Name of the latest and the latest an	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	