

Municipal Form

Office of Campaign and Political Finance

RECEIVED Newton City City

Fill in Reporting Period dates. 27 Pheting Date: 912	Ending Date: [0]36/15			
Type of Report: (Checkone) n MA 02459 Sth day preceding preliminary Sth day preceding election 30 day after election year-end report dissolution				
Charles Community Candidate Full Name (if applicable) Charles Community Office Sought and District Telephone Number (optional): 646 245 4487	Manuis for Dewton Latie Committee Name STATIE LADRER Name of Committee Treasurer STATIE LADRER Name of Committee Treasurer Committee Mailing Address Telephone Number (optional): 646245 4487			
SUMMARY BALANCE	INFORMATION:			
Line 1: Ending Balance from previous report	Ø			
Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2)				
Line 4: Total expenditures this period (page 5, line	4) 892.25			
Line 5: Ending Balance (line 3 minus line 4)	\square			
Line 6: Total in-kind contributions this period (page	6)			
Line 7: Total (all) outstanding liabilities (page 7)	\mathcal{D}			
Line 8: Name of bank(s) used:	NONEINA			
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: (Treasurer's signature) Date:				
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 a have them is a true and complete statement of all campaign.				
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 an earning 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.				
andedra - Karen Manning) 10/27/15				

M.U.L. c. 33 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.)

report all expend	litures. Please include your comn	nittee name and a page number on	each page.)	r
Date Paid	To Whom Paid	Addings CF 200 Aldress A		
10/14/25	(alphabetical listing) Signs Ly formandum	Address 1231 Washipten 52, Newton	Purpose of Expenditure Metal Stored S	73.31
10/14/15		Soldies Keld Bughton	Lacen Signs + Stands	437.24
10 20 15	Staples Staples	Soldies Keld Bughton Soldies Keld, Brighton	Laura Signs	349.87
9/26	Staples	Soldier Feld Bughton	Business Cards	\$10.61 x3
1	Line 12: Total Expenditures over \$50 (or listed above) 860.42			
Line 13: Total Expenditures \$50 and under* (not listed above) 31. 83			31.83	
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD 892.25				892,25

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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
	NONE			
		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 CO	ONTRIBUTIONS	

^{*} 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

* • •

M.G.L. c. 33 requires that the name and restaential 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)
	RONE		
Line 9: Total Recei	pts over \$50 (or listed above)		
ine 10: Total Rece	ipts \$50 and under* (not listed above)		
Line 11: TOTAL R	RECEIPTS IN THE PERIOD	0 Tina 10 shard	← Enter on page 1, line 2