

Signed under the penalties of perjury:

# Form CPF M 102: Campaign Finance Report RECEIVED Newton City Clerk

**Municipal Form** 

Office of Campaign and Political Finance

2015 JAN 20 PM 4: 36

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates. Olson, Beginning Date: Newton, MA 02459	Ending Date:
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	☐ 30 day after election ☐ year-end report ☑ dissolution
Candidate Full Name (if applicable)  Candidate Full Name (if applicable)  Office Sought and District)  Residential Address  Telephone Number (optional):	Committee Name  Committee Name  Committee Name  Name of Committee Treasurer  A Brah HIRO Nawy Market Mailing Address  Telephone Number (optional): 6 7 7 8 8 8 8 8 9 9
SUMMARY BALANCI	E INFORMATION:
Line 1: Ending Balance from previous report	#00.00
Line 2: Total receipts this period (page 3, line 11)	\$00.00
Line 3: Subtotal (line 1 plus line 2)	\$0.00
Line 4: Total expenditures this period (page 5, line	14) \$ 00,00
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period (page	7
Line 7: Total (all) outstanding liabilities (page 7)	\$-00.00 # 20,000,27 (MLF
Line 8: Name of bank(s) used:	OF AMERICA
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 confinance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:	entributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	only)
Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the bactivity, of all persons acting under the authority or on behalf of this committee in acconnected any liabilities nor made any expenditures on my behalf during this reporting process.	ordance with the requirements of M.G.L. c. 55. I have not received any contributions
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disburgements, campaign finance activity of all persons acting under the authority or on behalf of this	in-kind contributions and liabilities for this reporting period and represents the

(Candidate's signature)

#### 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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	(		(
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
Line 11: TOTAL F	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 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				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	,			
				Author Commission
			Lampeter and the state of the s	
		Line 12: Total Expenditures ov	er \$50 (or listed above)	
		Enic 12. Total Expellutures 6V	or 450 (or fisted above)	The state of the s
		Line 13: Total Expenditures \$50	and under* (not listed above)	*
		Zara zara zarpandituras wa	(not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	
			nould include only those expenditures	

\* 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 3

# 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*	Resid	ential Address	Description of Contribution	Value
		4			-
ontributes more tha	ribution is received from a person who an \$50 in a calendar year, you must report so of the contributor; in addition, if the	Line 15: In	-Kind Contributions	over \$50 (or listed above)	
ontribution is \$200	or more, you must also report the tion and employer.	Line 16: In-	-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$	Line 17: To	OTAL IN-KIND CO	ONTRIBUTIONS	

### 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 luring this reporting period.

furing this reporting	furing this reporting period.					
Date Incurred	To Whom Due	Address	Purpose	Amount		
	Previous Liabilities			20,000.00		
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	20,000,07		



# Form CPF M 102: Campaign Finance Report Municipal Form

RECEIVED Newton City Clerk

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

2015 JAN 20 PM 4: 29

Fill in Reporting Period dates: Olso Beginning Date: Oldo Beginning Date: Device Date: 12/3   14
Type of Report: (Check one)
8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution
Candidate Full Name (if applicable)  ALDEV MON AT COMPLY WD. S  Office Sought and District  AB CANDER AND COMMITTEE Treasurer  AB COMM. To Elect Mitchell Fisching  Committee Name  Telephone Number (optional) Committee Mailing Address  Telephone
SUMMARY BALANCE INFORMATION:
Line 1: Ending Balance from previous report
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 14)
Line 5: Ending Balance (line 3 minus line 4)
Line 6: Total in-kind contributions this period (page 6)
Line 7: Total (all) outstanding liabilities (page 7)
Line 8: Name of bank(s) used: BANK OF AMEN CA
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  Candidate with Com
Candidate without 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, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons activity of on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: Date: 70/15

### 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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
			10
-111			
ne 9: Total Receip	ots over \$50 (or listed above)	00.00	
ne 10: Total Receip	ots \$50 and under* (not listed above)	(w.w)	
11. TOTAL DI	ECEIPTS IN THE PERIOD	00.00	←□ 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 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
	(uphasecreu iseng)			
	-			
	Les agreements and the second		Land the transfer of the trans	
		·		
		19	* 11	
		The state of the s		Language and the second
	100			
				15.45.45
		Line 12: Total Expenditures ov	er \$50 (or listed above)	00.00
			(32 11510 400 (0)	
		Line 13: Total Expenditures \$50	0 and under* (not listed above)	00.00
			#	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TIRES IN THE PERIOD	OU. CC

<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.

Page 3

### 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
contributes more tha	ibution is received from a person who in \$50 in a calendar year, you must report is of the contributor; in addition, if the	Line 15: In-Kind Contributions	over \$50 (or listed above)	00,00
	or more, you must also report the	Line 16: In-Kind Contributions	\$50 & under (not listed abov	00,00
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS #	00.00

### 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
	PREVIOUS SILITIN	8		#Z0,000
			9	
	Enter on page 1 line 7 →	Line 18: TOTAL OUTSTAND	DING LIABILITIES (ALL)	70,000.2

· ·