

# Form CPF M 102: Campaign Finance Report Municipal Form

RECEIVED Newton City Clerk

Office of Campaign and Political Finance

Commonwealth of Massachusetts 2015 JAN -6 AM II: 38	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	1-2014 Ending Date: 12-31-2014
Newton MA 02450	
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)	CTE Brooke Lipsitt  Committee Name  Paul D. Lipsitt
Office Sought and District	Name of Committee Treasurer
	54 Kirkstall Rd Newtonville 0246
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	1551.48
Line 2: Total receipts this period (page 3, line 11)	1.20
Line 3: Subtotal (line 1 plus line 2)	1552.68
Line 4: Total expenditures this period (page 5, line	e 14) 850
Line 5: Ending Balance (line 3 minus line 4)	<del>702.68</del>
Line 6: Total in-kind contributions this period (pa	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	e Bank
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date:

Candidate with 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

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 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:

(Candidate's signature)

Date: 1/1/15

### 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.)

eport all receipts. Please include your committee name and a page number on each page.)  Name and Residential Address  Occupation & Employer						
Date Received						
Date Received	(aiphabeteat issuing required)					
			*10			
		The state of the s				
+17			11			
Commence of the second						
Line 9: Total Rece	ripts over \$50 (or listed above)					
Line 10: Total Rec	eipts \$50 and under* (not listed above)	1.20				
II. 11 TOTAL	DECEMBER IN THE REPLOY					
Line 11: TOTAL 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.)

Date Paid (alphabetical listing) (Address Purpose of Expenditure Amount  10-5 Andrea Kelley Futuent St., West Newton 50-  10-20 CTF Marthia Coukley Boston Contribution 100-  10-5 Historic Newton 52 & Was strengton St. Newton 700 Mountain 100-  10-6 Contribution 100-  10-7 Contribution 100-  10-8 Historic Newton 100-  10-9 Contribution 100-	eport all expenditures. Please include your committee name and a page number on each page.)					
Andrea Kelley Furnam St. West Newton   50 - 10 - 20   OTE Martha Coakley   Boston   Campaign Contribution   100 - 100 - 100    10 - 5   Historic Newton   52 & Washington St. Contribution   400 - 100 - 100 - 100    10 - 6   Historic Newton   Contribution   400 - 100 - 100    10 - 7   Historic Newton   Contribution   400 - 100    10 - 8   Historic Newton   Contribution   400 - 100    10 - 8   Historic Newton   Contribution   400 - 100    10 - 10 - 10 - 100 - 100    10 - 10 - 100 - 100    10 - 10 - 100 - 100    10 - 10 - 100 - 100    10 - 10 - 100 - 100    10 - 10 - 100 - 100    10 - 10 - 100 - 100    10 - 10 - 100 - 100    10 - 10 - 100 - 100    10 - 10 - 100 - 100    10 - 10 - 100 - 100    10 - 10 - 100						
10-20 CTE Martha Couldey Boston Carry aufin Contribution 100-  10-5 Historic Newton 52 & washery ton st Newton From Newton Fro	Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
Historic Newton   528 was shery ton \$1   Construction   400 -	10-5	Andrea Kelley		NDCC Brunch	50-	
Newton Contribution	10-20	CTE Martha Coakley	Boston	Campaign	100-	
Line 13: Total Expenditures \$50 and under* (not listed above)	10-5	Historic Newton		Contribution	700-	
Line 13: Total Expenditures \$50 and under* (not listed above)						
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Line 13: Total Expenditures \$50 and under* (not listed above)						
Line 13: Total Expenditures \$50 and under* (not listed above)						
Line 13: Total Expenditures \$50 and under* (not listed above)						
	Line 12: Total Expenditures over \$50 (or listed above)				850-	
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD	Line 13: Total Expenditures \$50 and under* (not listed above)					
030		Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	858-	

<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 th	ribution is received from a person who an \$50 in a calendar year, you must report	Line 15: In-Kind Contributions	over \$50 (or listed above)	
contribution is \$200	ss of the contributor; in addition, if the  or more, you must also report the ation and employer.	Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C	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 during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
The state of the s				
	AND			