

Form CPF M 102: Campaign Finance Report **Municipal Form**

Office of Campaign and Political Finance RECEIVED Newton City Clerk

of Massachusetts	FUR WIRE City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	/1/2014 Ending Date: 9/1/2014 David A. Olson, CMC
Type of Report: (Check one)	Newton, MA 02459
8th day preceding preliminary 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution
JEANNE MARRA ZZO Candidate Full Name (if applicable)	COMMITTEE TO EVECT UEANNE MARRA ZZ
WARD ALDERMAN, WARD 3 Office Sought and District	DIANE BULLWINKLE Name of Committee Treasurer
25 MAGUE AVE, W. NEWON 02465 Residential Address	25 MAGUE AVE, WEST NEWTON 02465 Committee Mailing Address
Telephone Number (optional): 617.224.2031	Telephone Number (optional): 617. 224. 2031
SUMMARY BALANCE	E INFORMATION:
Line 1: Ending Balance from previous report	<u> </u>
Line 2: Total receipts this period (page 3, line 11)	\$ 1202.75
Line 3: Subtotal (line 1 plus line 2)	1202.75
Line 4: Total expenditures this period (page 5, line	687. 75
Line 5: Ending Balance (line 3 minus line 4)	515. 20
Line 6: Total in-kind contributions this period (page	ge 6) — —————————————————————————————————
Line 7: Total (all) outstanding liabilities (page 7)	687. 75
Line 8: Name of bank(s) used:	BANK, AURBURN DALE
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 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: 9/1/2014
activity, of all persons acting under the authority or on behalf of this committee in accincurred 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,
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, disbursements, 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 committee in accordance with the requirements of M.G.L. c. 55.
Signed under the negalties of periury:	(Candidata's signatura) Date: 9///14

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 Occupation & Employer					
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)		
8/8/14	RICHARD BULLWINKLE 17 MELOBY LNS WALTHAM 02451	\$ 100-			
8/8/14	DIANE CHAPUT 11 CUTLER ST, HOPEDALE 01747	100-			
7/28/14	JEANNE MARRAZZO (LOAN) 25 MAGUE AVE, WN 02465	370,29	REAL ESTATE AGENT NE PREFERED PROPERTIES 362 WATERTOWN ST 02458		
8/2/14	JEANNE MARRAZZO (LOAN) 25 MAGUE AV WN 02465	12.93			
8/5/14	JEANNE MARRAZZO (LOAN) 25 MAGUE AV WN 02465	23.91			
8/6/14	JEANNE MARRAZZO (COAN) 25 MAGUE ANE WY 02465	14,99			
8/20/14	JEANNE MARRAZZO (LOAN) 25 MARVE AVE LUN 02468	265,63	REAL ESTATE AGENT NE PREFERRED PROPERTIES 362 WATERTOWN ST 02458		
8/1/14	JANET STELMAN 1733 COMM AVE 02465	50-			
8 (30/4	JOANNE TOTINO 29 EARLAN, MEDFORD 02/5	\$ 100-			
Line 9: Total Receipts over \$50 (or listed above)					
Line 10: Total Receipts \$50 and under* (not listed above)					
Line 11: TOTAL RECEIPTS IN THE PERIOD (202, ₹5) ← 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.					

^{*} 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.)

report all expenditures. Please include your committee name and a page number on each page.)				
	To Whom Paid		D. CE.	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
8/20/14	MINUTEMAN PRESS	1383 WASHINGTON ST W. NEWTON 02465	FLYERS	\$ 265.63
7/28/14	SIGNS ON THE CHEAP	11525A STONEHOLLOW STE 100 AUSTIN TX 78758	LAWN 81GNS	370.29
Line 12: Total Expenditures over \$50 (or listed above) 635.92			635.92	
		Line 13: Total Expenditures \$50		51.83
* If you have iter	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.

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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
* 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.		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 $6 \rightarrow$	Line 17: TOTAL 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 during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
8/2/14	GoDADDY	14455 N. HAYDEN SUITE 219 SCOTBDALE AZ 8524	O WEBSITE	12.93
8/20/14	MINUTEMAN PRESS	1383 WASHINGTONS W. NEWTON 02468	FLYERS	265.63
7/28/14	SIGNS ON THE CHEAP	NISZSA STONEHOLOW SUITE LOD AUSTIN TX 78758	LAWN SIGNS	370.29
8/6/14	VISTA PRINT	95 HAYDEN AN LEXINGTON MA 024	BUSINESS CARDS	14.99
8/5/14	WE PAX	380 PORTAGE AN PALO ALGO CA 94306	ONLINE DONATION PROCESSING FEE	23.91
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				687.75