

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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File with: City or Town Clerk or Election Commission			RES TO SE	A service of the serv	1/20/2014
Reporting Period - Beginning:	10/19/2013	Ending:	12/31/2013	A Constant	
Type of report: 30 day after e	election			10 .0	
Deborah Crossley		The Commi	ttee to Elect	Deb C	rossley
Full Name of Candidate	<u> </u>	Marie de la companya	Committee Name	9	
Alderman/City of Newto	on		Jonathan Kan	ar	
Office Sought/ District	<del></del>	Nam	e of Committee Tre	 ∋asurer	
26 Circuit Ave			672 Chestnut	St	
Newton, MA 02461			Newton, MA 024	168	
Residential Address		·	Committee Addre		
SUMMA Ending Balance from Total receipts this Subtotal: Total expenditures Ending Balance:	period:		\$9,69	0.00 9.66 1.27	
Total inkind contri		period:	ta di tanàna ao amin'ny faritr'i Nord-Nord-Nord-Nord-Nord-Nord-Nord-Nord-	0.00	
Total outstanding l Name of bank(s) use		lage Bank	\$1,94	1.26	
Affidavit of Committee Treasurer:  I certify that I have examined this report, belief, a true and complete statement of all expenditures, disbursements, inkind contributing finance activity of all persons acting under requirements of M.G.L. c. 55.  Signed under the penalties of perjury:	. campaign finance a utions and liabiliti	ctivity includi: es for this rep	ng all contributions orting period and re	, loans, presents	receipts, the campaign
MATA				1/20	114
Treasurer's signature (in ink)					Dáte
Affidavit of Candidate (check 1 box on Candidate with Committee and no act I certify that I have examined this report, true and complete statement of all campaign this committee in accordance with the requirany liabilities nor made any expenditures or	tivity independen and attached schedu finance activity, coments of M.G.L. c.	les and it is, f all persons a 55. I have not	to the best of my kn cting under the auth received any contri	ority or	on behalf of
Candidate without Committee OR cand I certify that I have examined this report a a true and complete statement of all campaig disbursements, inkind contributions and liak finance activity of all persons acting under requirements of M.G.L. c. 55.	and attached schedul yn finance activity pilities for this re r the authority or c	es and it is, t including contr porting period	o the best of my kno ibutions, loans, rec and represents the c	wledge a eipts, e ampaign	and belief, expenditures,
Signed under the penalties of perjury:					

#### 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.

Date	Name and Residential	Address	Amount	Occupation and Employe
10/19/2013	Cox, M. Katherine 26 Mary Ellen Road Waban, MA 02468		\$100.00	
10/20/2013	Godine, Frances 19 Crofton Road Waban, MA 02468		\$200.00	Speech/language Pathol Retired
10/20/2013	Schlorholtz, Esther 63 Smith Ave. Newton, MA 02465		\$200.00	Banking Boston Private Bank
10/21/2013	Testa, Silvia Z. 84 Adeline Rd. Newton, MA 02459		\$100.00	Physician Children's Hospital
	ized Receipts emized Receipts ipts		\$600.00 \$240.00 \$840.00	

## 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 over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
10/26/2013	Deborah Crossley 26 Circuit Ave. Newton, MA 02461	\$77.82	Reimbursement (See R1)
10/21/2013	Grenier Print Shop, Inc. 3702 Washington St. Jamaica Plain, MA 02130	\$2,783.79	Postage For Mailings
12/2/2013	Grenier Print Shop, Inc. 3702 Washington St. Jamaica Plain, MA 02130	\$132.81	Dear Friend Cards
10/21/2013	Grenier Print Shop, Inc. 3702 Washington St. Jamaica Plain, MA 02130	\$5 <b>,</b> 275.56	Materials & Printing For Mailings
10/21/2013	Grenier Print Shop, Inc. 3702 Washington St. Jamaica Plain, MA 02130	\$199.22	Sign Brackets/holders
11/6/2013	Historic Newton 527 Washington Street Newton, MA 02458	\$150.00	Fundraising Event
10/26/2013	Jonathan Kantar 672 Chestnut St. Newton, MA 02468	\$20.00	Liability repayment
10/26/2013	Jonathan Kantar 672 Chestnut St. Newton, MA 02468	\$20.00	Liability repayment
10/26/2013	Jonathan Kantar 672 Chestnut St. Newton, MA 02468	\$117.35	Liability repayment
10/25/2013	NWW Comm. for Community Living, Inc. 1301 Centre St. Newton, MA 02459	\$100.00	Contribution for 40th Anniv.
10/26/2013	Paypal	\$8.15	Transaction Processing Fee

. Date	Name and Address	Amou	unt	Purpose
ě				
10/27/2013	Paypal	\$1	.32	Transaction Processing Fee
10/30/2013	U.S. Postal Service	\$132	.00	Postage For Mailings
	Waban, MA 02468			
10/30/2013	U.S. Postal Service Waban, MA 02468	\$99	.00	Postage For Mailings
10/30/2013	U.S. Postal Service Waban, MA 02468	\$112	.00	Postage For Mailings
	zed Expenditures emized Expenditures nditures	\$9,229 \$22 \$9,251	2.25	

#### Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind 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. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description Occupation/Employer
Total Ite	mized Inkind Contributions	\$0.00	
Total Uni	temized Inkind Contributions	\$0.00	
Total Ink	ind Contributions	\$0.00	

## 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 the liabilities incurred during this reporting period.

Date	To Whom Due	Amount	Purpose
10/30/2009	Crossley (loan), Deborah 26 Circuit Ave. Newton, MA 02461	\$130.74	Printing Campaign Material @ Staples
10/30/2013	Crossley (loan), Deborah 26 Circuit Ave. Newton, MA 02461	\$132.00	Postcard Stamps
10/30/2013	Crossley (loan), Deborah 26 Circuit Ave. Newton, MA 02461	\$99.00	Postcard Stamps
10/30/2013	Crossley (loan), Deborah 26 Circuit Ave. Newton, MA 02461	\$132.00	Postcard Stamps
10/12/2009	Crossley (loan), Deborah 26 Circuit Avenue Newton, MA 02461	\$179.45	Printing Campaign Material
10/3/2009	Crossley (loan), Deborah 26 Circuit Ave. Newton, MA 02461	\$207.37	Printing Campaign Material @ Staples
9/29/2009	Crossley (loan), Deborah 26 Circuit Ave. Newton, MA 02461	\$10.00	Voter List Fee
10/23/2009	Crossley (loan), Deborah 26 Circuit Ave. Newton, MA 02461	\$123.13	Printing Campaign Material @ Staples
10/27/2013	Crossley (Loan), Deborah 26 Circuit Ave Newton, MA 02461	\$22.25	Gifts
8/28/2009	Crossley (Loan), Deborah 26 Circuit Avenue Newton, MA 02461	\$205.32	Mailing and Sign Matls., Postage, Newto
12/22/2009	Crossley (Loan), Deborah 26 Circuit Avenue Newton, MA 02461	\$150.00	Loan from candidate

Date	To Whom Due	Amount	Purpose
•			
12/18/2009	Crossley (Loan), Deborah 26 Circuit Avenue Newton, MA 02461	\$100.00	Loan from candidate
3/1/2010	Crossley (Loan), Deborah 26 Circuit Avenue Newton, MA 02461	\$200.00	Loan from candidate
12/31/2010	Crossley (Loan), Deborah 26 Circuit Avenue Newton, MA 02461	\$250.00	Loan from candidate
Total Outst	anding Liabilities	\$1,941.26	

## Schedule R: Reimbursements

Date	Reimbursee			Amount
10/26/2013	Deborah Crossley			\$77.82



## Form CPF R1: Itemization of Reimbursements Municipal Form

Office of Campaign and Political Finance

ile with:		1/20/201
ity or Town Clerk or Ele	ction Commission	
	Deborah Crossley	
	Indívídual Being Reimbursed	
	The Committee to Elect Deb Crossley	
- Louis - Loui	Committee Name	
	\$77.82	
	Amount of Reimbursement	
	10/26/2013	
	Date of Reimbursement	
Signed under the penal	lties of perjury:	
Candidate's/Treasurer	's signature (in ink)	Date

Date Vendor Name and Address

Amount Purpose