

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

Office of Campaign and Political Finance 2014 JAN 13 P 3: 15

Commonwealth of Massachusetts		Oc	+ 19, 2013 F	NEWTON, MASS	
Fill in Reporti	ng Period dates: Begin	nning Date: Jan	2020 Ending D		
	rt: (Check one) eding preliminary   8th day p	preceding election [	30 day after election	year-end report	dissolution
Vica A 30 Telephone Number (	Candidate Full Name (if applicable)  Candidate Full Name (if applicable)  Character St. No.  Residential Address  (optional):	wton, MA	Christope Nan 30 Cha	Committee Name  Red Samue  ne of Committee Treasurer  So Sf. Nawto  committee Mailing Address	oerg Ds m, MA
	SUMM	MARY BALANCI	E INFORMATION:		
]	Line 1: Ending Balance from p	previous report	3,3	53.70	
1	Line 2: Total receipts this period	od (page 3, line 11)		<b>&gt;</b>	
1	Line 3: Subtotal (line 1 plus lin	ne 2)	3, 3	53.70	
1	Line 4: Total expenditures this	period (page 5, line	,	>	
1	Line 5: Ending Balance (line 3	minus line 4)	3,35	3.70	
	Line 6: Total in-kind contribut	ions this period (pag	ge 6)	3	
1	Line 7: Total (all) outstanding	liabilities (page 7)	_	<del>)</del>	
	Line 8: Name of bank(s) used:	Eastern B	Bank, Auburn	idale, MA	
activity, including al	examined this report including attached school contributions, loans, receipts, expenditure of persons acting under the authority or on b	es, disbursements, in-kind c	ontributions and liabilities for this	s reporting period and represents of M.G.L. c. 55.	
FOR CANDIDA	ATE FILINGS ONLY: Affidavit o	of Candidate: (checky box	x only)		
activity, of all p	h Committee ave examined this report including attached bersons acting under the authority or on beh bilities nor made any expenditures on my b	alf of this committee in acc	cordance with the requirements of		
I certify that I h	hout Committee have examined this report including attached, including contributions, loans, receipts, exce activity of all persons acting under the activity of all persons activity of all persons activities activ	xpenditures, disbursements,	, in-kind contributions and liabiliti	ies for this reporting period and	represents the
Signed under the p	enalties of perjury:		(Candidate'	s signature) Date:	

#### **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.)

report all receipts. Please include your committee name and a page number on each page.)					
Junema.	Name and Residential Address	Occupation & Employer (for contributions of \$200 or more)			
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 of more)		
	EXECUTE SECURITION OF THE PROPERTY OF THE PROP				
		`			
Line 9: Total Recei	pts over \$50 (or listed above)	ne 12: Total Ex			
10 7 10					
Line 10: Total Rece	ipts \$50 and under* (not listed above)				
Line 11: TOTAL	RECEIPTS IN THE PERIOD	-0	←□ Enter on page 1, line 2		
		0 1: 10 1	ld include only those receipts not itemized shows		

<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
	8/		T	Timount
		7		
		Line 12: Total Expenditures of	over \$50 (or listed above)	in of Total
		The second secon		
		Line 13: Total Expenditures \$	referring of	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI		

<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	<b>Description of Contribution</b>	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 →	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	0

#### **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
£G 2, 0.35 m/s		A R Day of the State of the Sta	As any organic of a responsible page.	SPESS Searca
	e e demaración de la maco.		SECTION STATES	
Allendary our s			A CONTRACTOR OF THE CONTRACTOR	

Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)