Commonwealt	h Newton City Clerk	of Campaign a	nd Political Finance	
of Massachuset		a da ser a cara da ser estas Anti-	File with: City or Town Cle	rk or Election Commission
Fill in Rep	2013 AUG 30 AM 10: 35 porting Period dates: Beginning Date:	1-1-13	3 Ending Date:	
Type of R	epont ewide A. Olson, CMC epont ewide black blac			
• -		ation 70 d		
	preceding preliminary 28th day preceding electron		ay after election vear-end report	dissolution
Susa	n Flicop		mmittee to Elect Sue	Fling
1 20.50	Candidate Full Name (if applicable)		Committee Name	Flicop
r				
L	Office Searcht and District		hristopher Hill	
P	Office Sought and District		Name of Committee Treasurer	
		163		HIII MA02467
	Residential Address		Committee Mailing Address	-
Telephone Nu	mber (optional):	Teleph	one Number (optional): $617 232 - 32$	7310
Г	SUMMARY BA	LANCE INF	ORMATION:	
	Southand Di			
	Line 1: Ending Balance from previous rep	ort	63,32	
	Line 2: Total receipts this period (page 3,	line 11)	0	
	Line 3: Subtotal (line 1 plus line 2)		63,32	
	Line 4: Total expenditures this period (pag	ge 5, line 14)	63.32	
	Line 5: Ending Balance (line 3 minus line	4)	0	
	Line 6: Total in-kind contributions this pe	riod (page 6)	0	
	Line 7: Total (all) outstanding liabilities (p	page 7)	0	
	Line 8: Name of bank(s) used: $V_l l a$	ige Bank	L	
I certify that I activity, includ	ommittee Treasurer: have examined this report including attached schedules and it is, ling all contributions, loans, receipts, expenditures, disbursement y of all persons acting under the authority or on-behalf of this cor	s, in-kind contributio	ns and liabilities for this reporting period and repres	
Signed under	the penalties of perjury:		(Treasurer's signature) Date:	8/50/15
FOR CAN	DIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)		
	te with Committee and no activity independent of the commit hat I have examined this report including attached schedules and		y knowledge and belief, a true and complete statem	ent of all campaign finance

Municipal Form

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 OR Candidate with independent activity filing separate report

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:

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.)

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)	0	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL F	RECEIPTS IN THE PERIOD	0	← 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.

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	
82012	League of workers	Suite 1000	Fire Denerters	63,32	
	League of Women Voters of US Education	It and washington DC	to Dissolve Acct	62,02	
		20036			
			Г	[]	
				<i></i>	
Line 12: Total Expenditures over \$50 (or listed above) 63, 33					
Line 13: Total Expenditures \$50 and under* (not listed above)					
	Enter on page 1, line $4 \rightarrow$ Line 14: TOTAL EXPENDITURES IN THE PERIOD 63,32				

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer, (for contributions of \$200 or more) *
	الاست المراجع ا المراجع (مراجع مراجع المراجع الم المراجع (مراجع مراجع المراجع ال		
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL R	ECEIPTS IN THE PERIOD	6	← 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.