

Form CPF M 102: Campaign Finance Report Municipal Form 2013 CCT 28 P 4: 48 Municipal Form Office of Campaign and Political Finance

NEWTON, MASS

CHERYL LAPPIN	L CO	MMITTEE TO ELECT CHERYL L	APPIN
Candidate Full Name (if applicable)		Committee Name	
WARD 8 ALDERMAN Office Sought and District	RIC	HARD WEISHAUS Name of Committee Treasurer	**************************************
6 DORCAR RD, CHESTNUT HILL, MA 02467	41 0	GOODNOUGH RD, CHESTNUT I	IILL, MA 024
Residential Address		Committee Mailing Address	
Felephone Number (optional):	Telephor	ne Number (optional):	***************************************
SUMMARY BALANC	E INFO	PRMATION:	
Line 1: Ending Balance from previous report	y	783.99	
Line 2: Total receipts this period (page 3, line 11))		in in the second of the second
Line 3: Subtotal (line 1 plus line 2)		783.99	
Line 4: Total expenditures this period (page 5, lin	e 14)	22.50	
Line 5: Ending Balance (line 3 minus line 4)		761.49	
Line 6: Total in-kind contributions this period (pa	ige 6)	0	
Line 7: Total (all) outstanding liabilities (page 7)		0	
Line 8: Name of bank(s) used CITIZENS BAN	ĪΚ		
Indidavit of Committee Treasurer: ertify that I have examined this report including attached schedules and it is, to the best tivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of nance activity of all persons acting under the authority or on behalf of this committee in gned under the penalties of perjury: OR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	contributions accordance v	and liabilities for this reporting period and represents with the requirements of M.G.L. c. 55.	campaign finance the campaign
Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in actinicured any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee OR Candidate with independent activity filing separately that I have examined this report including attached schedules and it is, to the	best of my k cordance wit period. parate repor	th the requirements of M.G.L. c. 55. I have not receive	ed any contributions

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)
		7 (c)	
ne 9: Total Receipt	s over \$50 (or listed above)		
ne 10: Total Receip	ts \$50 and under* (not listed above)		
ne 11: TOTAL RE	CEIPTS IN THE PERIOD		← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	
	950 (- 114 1 1 2			
	ver \$50 (or listed above)			
e 10: Total Receipts S	550 and under* (not listed above)			
	EIPTS IN THE PERIOD			

^{*} 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 n

Date Paid	To Whom Paid (alphabetical listing)	mittee name and a page number on each page.) Address Purpose of Expenditure	Amount
			indunting will problem
		Line 12: Total Expenditures over \$50 (or listed above)	
		Line 13: Total Expenditures \$50 and under* (not listed above) BANK CHARGES	22.50
		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 above. Page 4

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		7		
		Line 12: Expenditures over	\$50 (or listed above)	
		Line 13: Expenditures \$50 and under* (not listed above)		
	Enter on page 1 time 4 →	Line 14: TOTAL EXPENS	DITURES 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 above.

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 Contribut	ion Value
		Example of the Apple of the College	
		Line 15: In-Kind Contributions over \$50 (or listed above)	
		Line 16: In-Kind Contributions \$50 & under (not listed about	ove)
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			

^{*} 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.

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