



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

BOARD OF ELECTION
COMMISSIONERS

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: ^{2013 SEP - 9 12:03} Beginning Date: 05/24/2013 Ending Date: 09/06/2013

NEWTON, MASS

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Alison Leary
Candidate Full Name (if applicable)
Ward 1 - Alderman
Office Sought and District
192 Chapel Street Newton MA 02458
Residential Address
Telephone Number (optional): _____

Committee to Elect Alison Leary
Committee Name
Andrea Kozinetz
Name of Committee Treasurer
192 Chapel St. Newton MA 02458
Committee Mailing Address
Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>—</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$ 825⁰⁰</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$ 825⁰⁰</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$ 761³⁷</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$ 63.63</u>
Line 6: Total in-kind contributions this period (page 6)	_____
Line 7: Total (all) outstanding liabilities (page 7)	<u>378⁸⁷</u>
Line 8: Name of bank(s) used:	<u>Village Bank</u>

Affidavit of Committee Treasurer:

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 all 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: Andrea Kozinetz (Treasurer's signature) Date: 9/9/2013

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee

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

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: Alison Leary (Candidate's signature) Date: 9/8/13

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)
4/2013	Bliss, Tamara 9 Lewis St Newton	50	
8/2013	Boyce, Gerard + Connie 57 Oakland Ave Newton	50	
8/2013	Epstein, Geoffrey 67 Arlington St Newton	50	
8/2013	Fischer Gomburg, Diane 290 Islington Road Newton	50	
8/2013	Fitzgibbons, Shawn 300 Homer Street Newton	50	
8/2013	HOWARD SPARKS Michelle 51 Jackson Road Newton	200	
7/2013	Leary Jocelyn Cobbets Pond Road Windham NH	50	
8/2013	Leo Maria 2014 Adams Street Newton	50	
8/2013	LEVIN, LOIS 497 Chestnut St Newton	50	
7/2013	Lipsett, Brooke 54 Kirkfall Road Newton	100	

Line 9: Total Receipts over \$50 (or listed above)	700
Line 10: Total Receipts \$50 and under* (not listed above)	125
Line 11: TOTAL RECEIPTS IN THE PERIOD	825

← 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 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 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				

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
8/20/13	Alison Leary	192 Chapel St Newton MA 02458	STAPLES/ PRINT letter	\$ 378.87
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				378.87