Form CPF M 102: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance
Commonwealth of Massachusetts
Fill in Reporting Period dates: Beginning Date: 09/06/2073 Ending Date: 10/18/2073
Type of Report: (Check one)
🗋 8th day preceding preliminary 🕅 8th day preceding election 🗌 30 day after election 🗌 year-end report 🔲 dissolution
Auson Leans (Inmittee to sheet Attain keans
Candidate Full Name (if applicable)
WARDI AlderMAN Andrea Kozinet 2-
MARDI AlderMAN Office Sought and District 192 Chapel Mut Nummer 192 Chapel Shirt NewAmmer 192 Chapel Shirt NewAmmer
Residential Address 07458 Committee Mailing Address 074
Telephone Number (optional):
SUMMARY BALANCE INFORMATION:
Line 1: Ending Balance from previous report $\frac{3}{63}$
Line 2: Total receipts this period (page 3, line 11) /3-95
Line 3: Subtotal (line 1 plus line 2) $\frac{14586^3}{28}$
Line 4: Total expenditures this period (page 5, line 14) 580 38
Line 5: Ending Balance (line 3 minus line 4) β 878, 25
Line 6: Total in-kind contributions this period (page 6)
Line 7: Total (all) outstanding liabilities (page 7) 5746. 574
Line 8: Name of bank(s) used: Nillzy Bank, Numm Mut
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: Date: D
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 final 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 contribution 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: (Candidate's signature) Date: 10-11-201

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 Receipts over \$50 (or listed above)		F 1300	see attached sheet
Line 10: Total Rece	ipts \$50 and under* (not listed above)	F 95	
Line 11: TOTAL R	ECEIPTS IN THE PERIOD	\$1395	←□ 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.

RECEIPTS - 09/06/2013-10/18/2013

10/8/2013 Ac	dler	Elizabeth	\$50	29 Bridge S Newton	MA	02458
10/9/2013 Be	ethune	Lawrence	\$100	432 Waltha Newton	MA	02465
10/12/2013 BI	liss	Tamara	\$150	9 Lewis Str Newton	MA	02458
9/8/2013 Gi	reenberg	Maria	\$50	88 Adams SNewton	MA	02458
9/8/2013 He	ess-Maha	Ted	\$50	871 Washir Newton	MA	02465
9/8/2013 Hi	uber	Louise	\$100	39 Salisbur Newton	MA	02458
9/8/2013 Ke	elley	Andrea	\$50	28 Putnam Newton	Ma	02465
9/8/2013 Le	eary	Anthony	\$50	97 Grosvne Needham	MA	02492
9/8/2013 M	lartignoni	Suzanne	\$100	29 Carletor Newton	MA	02458
9/8/2013 M	lau	Mimoza	\$100	15 Arundel Newton	MA	02458
9/11/2013 M	logul	Kathleen	\$100	218 Frankli Newton	MA	02458
9/24/2013 M	looradian	Cyrilla	\$150	190 Chapel Newton	MA	02458
10/8/2013 Se	emonian	Marian	\$100	373 Dedha Newton	MA	02459
9/23/2013 Sv	weet	Doris	\$100	281 Lexing Newton	MA	02466
9/24/2013 Vi	ittori	Dian	\$50	28 Cottony Newton	MA	02459

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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
9/8/2013	Sondince works	827 Bain Sires Newron 02459	food - fundraiser	47020
10/14/2013	Peter Mooradian	192 Chapel Sheer New Jon	food - fundraiser Reimburse - Campaign office puppines	11018
		024	8	
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line $4 \rightarrow$ Line 14: TOTAL EXPENDITURES IN THE PERIOD				158038

* 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 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		
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	

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
			See attached Sheet	
	Enter on page 1, line $7 \rightarrow$	Line 18: TOTAL OUTSTAND	\$546.54	

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