



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 11/26/13 Ending Date: 12/31/13

Type of Report: (Check one)

- 8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

Andrea Steenstrup
Candidate Full Name (if applicable)

School Committee, Newton (ward 2)
Office Sought and District

21 Kimball Terrace, Newton, MA 02460
Residential Address

Telephone Number (optional): _____

Committee to Elect Andrea Steenstrup
Committee Name

Marcia Taberker
Name of Committee Treasurer

21 Kimball Terrace, Newton, MA 02460
Committee Mailing Address

Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>309.35</u>
Line 2: Total receipts this period (page 3, line 11)	<u>350</u>
Line 3: Subtotal (line 1 plus line 2)	<u>659.35</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>643.37</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>15.98</u>
Line 6: Total in-kind contributions this period (page 6)	<u>—</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>—</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: Maria G. Taberker (Treasurer's signature) Date: 1/20/14

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: [Signature] (Candidate's signature) Date: 1/21/14

SCHEDULE A: RECEIPTS 11/26/13-12/31/13

Receipts over \$50

Deposit date	Name	Residential Address				Amount
9/12/13	Melissa Goldstone	68 Tyler Terrace	Newton	MA	02459	\$100
Total Receipts over \$50						\$100
Total Receipts \$50 and Under						\$250
Total Receipts						\$350

SCHEDULE B: EXPENDITURES 11/26/13-12/31/13

<u>Date Paid</u>	<u>To Whom Paid</u>	<u>Address</u>	<u>Purpose of Expenditure</u>	<u>Amount</u>
31-Dec	Blue Front Telecom Group	62B Commercial Wharf, Boston MA 02110	Return of payment due to poor service (robocall	(\$586.85)
11-Dec	Maureen Precopio	20 Newell Rd., Newton, MA 02466	Flyer design	\$65.00
31-Dec	Andrea Steenstrup	21 Kimball Terrace, Newton MA 02460	Reimbursement for expenses	\$1,163.52

Total Expenditures over \$50

Total Expenditures \$50 and under

Total Expenditures

\$1.70

\$643.37

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
<p>* 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.</p> <p style="text-align: right;">Enter on page 1, line 6 →</p>			Line 15: In-Kind Contributions over \$50 (or listed above)	—
			Line 16: In-Kind Contributions \$50 & under (not listed above)	—
			Line 17: TOTAL IN-KIND CONTRIBUTIONS	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
<p style="text-align: right;">Enter on page 1, line 7 →</p>			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	0

Form CPF R1: Itemization of Reimbursements

Individual Being Reimbursed: Andrea Steenstrup
Committee Name Committee to Elect Andrea Steenstrup

Date of Reimbursement: 12/31/13

ITEMIZED EXPENDITURES IN EXCESS OF 50

<u>Date Paid</u>	<u>Vendor Name</u>	<u>Vendor Address</u>	<u>Purpose of Expenditure</u>	<u>Amount</u>
12/16/14	Staples	899 Boylston St., Boston MA 02115	mailer	\$983.11
11/7/14	Shutterfly	2800 Bridge Parkway, Redwood City, CA 94065	mailer	\$166.82
TOTAL EXPENDITURES IN EXCESS OF \$50				\$1,149.93
TOTAL EXPENDITURES \$50 AND UNDER				\$13.59
TOTAL AMOUNT REIMBURSED				\$1,163.52