



# 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: 10/30/11 Ending Date: 12/31/11

Type of Report: (Check one)

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

Mr John Rice  
Candidate Full Name (if applicable)

WARD Alder MAN WARD 5  
Office Sought and District

9 Selden STREET  
Residential Address

Telephone Number (optional): \_\_\_\_\_

Committee TO ReElect John Rice  
Committee Name

PAUL M COLLIER  
Name of Committee Treasurer

32 Brewster Road  
Committee Mailing Address

Telephone Number (optional): \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$411.07</u>
Line 2: Total receipts this period (page 3, line 11)	<u>—</u>
Line 3: Subtotal (line 1 plus line 2)	<u>—</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>—</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$411.07</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>The Village Bank</u>

BOARD OF ELECTION COMMISSIONERS

#### 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: \_\_\_\_\_ (Treasurer's signature) Date: 1/18/12

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

**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 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: \_\_\_\_\_ (Candidate's signature) Date: 1/23/12

Rice







**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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		—	
		—	
Line 9: Total Receipts over \$50 (or listed above)		—	
Line 10: Total Receipts \$50 and under* (not listed above)		—	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		—	← 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.



















307 Auburn Street Auburndale, MA 02466 (617) 527-6090  
 Branch Offices in Newton and Wayland

COMMITTEE TO ELECT JOHN RICE  
 PAUL M CULLEN  
 32 BREWSTER RD  
 NEWTON MA 02461

SUMMARY OF YOUR ACTIVITY  
 STATEMENT DATE DEC 23 11  
 STATEMENT NUMBER 4190010175  
 BEGINNING BALANCE 411.07  
 DEPOSIT AMOUNT + .00  
 WITHDRAWAL AMOUNT - .00  
 SERVICE CHARGE - .00  
 ENDING BALANCE = 411.07

DEBITS 0

GET YOUR ACCOUNT INFORMATION ON THE  
 GO WITH TEXT MESSAGE BANKING. SIGN  
 UP FOR THIS FREE SERVICE THROUGH  
 VILLAGE ONLINE BANKING TODAY!

FREE CHECKING	4190010175	BALANCE SUMMARY
ACTIVITY BEGINNING	NOV 24 11	\$ 411.07
NO ACTIVITY		

SUMMARY OF YOUR DEPOSIT ACCOUNTS

ACCOUNT DESCRIPTION	ACCOUNT NUMBER	ACCOUNT BALANCE	MATURITY DATE
FREE CHECKING	4190010175	\$ 411.07	
TOTAL OF YOUR DEPOSIT ACCOUNTS		\$ 411.07	





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 Please print or type all information, except signatures.

**Fill in dates:**

Reporting Period Beginning 10/31/2011 Ending 12/31/2011

**Type of report: (Check one)**

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

Susan Edelstein Rosenbaum  
Full Name of Candidate (if applicable)

School Committee - Ward 5  
Office Sought and District

121 Winslow Rd Waban, MA.  
Residential Address 02468

617-332-0306  
Tel. No. (optional)

Committee to Elect Susan Rosenbaum  
Committee Name

Rochelle Borden  
Name of Committee Treasurer

121 Winslow Rd. Waban, MA.  
Committee Mailing Address 02468

617-332-5003  
Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report	\$ 2,854.28
Line 2: Total receipts this period (page 2, line 11)	\$ 25.00
Line 3: Subtotal (line 1 plus line 2)	\$ 2,879.28
Line 4: Total expenditures this period (page 3, line 14)	\$ 0.00
Line 5: Ending balance (line 3 minus line 4)	\$ 2,879.28
Line 6: Total in-kind contributions this period (page 4)	\$ 0.00
Line 7: Total (all) outstanding liabilities (page 4)	\$ 2,457.05
Line 8: Name of bank(s) used	<u>The Village Bank, Auburndale, MA</u> <u>02466</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.

Rochelle Borden Signed under the penalties of perjury: 12/31/2011

Treasurer's signature (in ink) Date

**FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)**

**Affidavit of Candidate: (check 1 box only)**

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 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.

\_\_\_\_\_  
Candidate signature (in ink) Date

Rosenbaum



**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.*

This page may be copied 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 in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)		25	00	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		25	00	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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			<b>Line 17: Total In-kind</b>	

\* 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.

**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
8/11/09 - 11/11/09	Susan Rosenbaum	121 Winslow rd. 02468	Campaign Loan	\$2,457.05
Enter on page 1, line 7			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	\$2,457.05





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 Please print or type all information, except signatures.

2012 JAN 17 P 5:19  
NEWTON MASS  
BOARD OF ELECTION COMMISSIONERS

Fill in dates: Reporting Period Beginning Month 10 Date 21 Year 2011 Ending Month 12 Date 31

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

MARGIE ROSS DECTOR  
Full Name of Candidate (if applicable)  
SCHOOL COMMITTEE  
Office Sought and District  
20 VINE ST NEWTON, MA 02459  
Residential Address  
Tel. No. (optional)

COMMITTEE TO ELECT MARGIE ROSS DECTOR  
Committee Name  
DAVID KALIS  
Name of Committee Treasurer  
66 ANDREW ST NEWTON MA 02461  
Committee Mailing Address  
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:	
Line 1: Ending balance from previous report	\$ <u>1710.06</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>0</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>1710.06</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>0</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>1710.06</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>0</u>
Line 8: Name of bank(s) used	<u>CITIZENS 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.  
[Signature] Signed under the penalties of perjury: 1/11/12  
Date  
Treasurer's signature (in ink)

### FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

**Affidavit of Candidate: (check 1 box only)**  
 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 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.  
[Signature] Signed under the penalties of perjury: 1/11/12  
Date  
Candidate signature (in ink)

Ross Dector











**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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			<b>Line 17: Total In-kind</b>	

\* 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.

**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			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	