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Form CPF M 102: Campaign Finance Report WALTHAM Municipal Form CHTY CHERK'S OFFICE Municipal Form Office of Campaign and Political Finance

2011 NOV -7 P 8: 51

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with:	RECORDED					
or Town Clerk or Election Commission	Please print or type	all informati	on except sign	natures.		
Fill in dates: Reporting Period Beginning	195	-{ ^Y ^{CS} }	Ending	Month	J.	11
Reporting Period Beginning						
Type of report: (Check one) 18th day preceding preliminary Full Name of Candidate 1 Office Sought and	LARGE	election [un to E	Committee	AUL	BRASCO
19 CKESTVI	<u> </u>	_	AT OK	ANUC	ling Address	
WALTHAM, Residential Add	1) 209 - 25 <u>64</u> Tel. No. (options		ALTHA	M M	Δ (761) δ	No. (optional)
Line 2: Total Line 3: Subto Line 4: Total Line 5: Endir Line 6: Total i Line 7: Total Line 8: Name	summary B g balance from receipts this per tal (line I plus line) expenditures to g balance (line) n-kind contribu- (all) outstanding of bank(s) used	n previous eriod (page 2) his period minus line 4 tions this g liabilities	s report 2, line 11) I (page 3, line b) period (page 4)	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	370	() 17 () 17 () 17 () 45
Affidavit of Committee Treasurer: I certify that I have examined this report finance activity, including all contribution campaign finance activity of all persons a Treasurer's signature (in ink)	is, loans, receipts, expenditu pring under the authority or Signed un	on behalf of this der the penalties	is, in-kind contribu committee in accor of perjury:	rdance with th	the requirements o	fM.G.L. c. 55.
FORC	ANDIDATE FIL	INGS ON	LY: (CANDID	ATE MUST	SIGN BELOW)	
Affidavit of Candidate: (check 1 box Candidate with Committee and no I certify that I have examined this repor finance activity, of all persons acting ut contributions, incurred any liabilities no Candidate without Committee OF I certify that I have examined this repor finance activity, including contribution campaign finance activity of all persons	activity independent of the including attached schedul der the authority or on behar made any expenditures on Candidate with Independ to including attached schedul, loans, receips, expenditure acting under the authority of the schedul acting under the authority of the authority o	les and it is, to the alf of this commit my behalf during lent activity filin les and it is, to the	this reporting peri g separate report e best of my knowl s, in-kind contribu- is committee in acc	od. ledge and beli tions and liab	ef, a true and cor	nplete statement of all campa sorting period and represents

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 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

Date Name and Residential Address Amount Occupation & Employer Received (alphabetical listing required) (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) Line 11: TOTAL RECEIPTS 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.

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