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# Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

CITY OF WALTHAM 2011 SEP 12 P 4: 43

Commonwealth of Massachusetts
File with:

Cit

with: y or Town Clerk or Election Commission  Please print or type all information, except signatures.
Fill in dates:  Month  Date  Year  Reporting Period Beginning  Month  Fill in dates:  Period Beginning  Month  Date  Year  Ending  Date  Year
Type of report: (Check one)  Sth day preceding preliminary   8th day preceding election   30 day after election   year-end report   dissolution
Full Name of Candidate (if applicable)  Ward E Council  Office Sought and District  Residential Address  Tel. No. (optional)  Tel. No. (optional)
SUMMARY BALANCE INFORMATION:  Line 1: Ending balance from previous report  Line 2: Total receipts this period (page 2, line 11)  Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this period (page 3, line 14)  Line 5: Ending balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period (page 4)  Line 7: Total (all) outstanding liabilities (page 4)  Line 8: Name of bank(s) used
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 (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 filling 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:

## 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

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Received	by the copied if additional pages are required to report the page.  Name and Residential Address  (alphabetical listing required)		ount	Occupation & Employer
8/17	Susan Bernsten Stund	25	a	(for contributions of \$200 or more
_//./	36 Fullers I Walker	25	الم	
8/10	3) Fuller CarlField	25	00	
8/19	Sandra carter 16 Forkersa wartham Ma Susan Cormier 23a Bener, Ist Wartham Patrick Kati	25	00	
8/19	23a Benefit st Waltham	ta,5	a	
8/18	12 Conardine	25	00	
8/24 1	sa Greavery Bruto/ R.I. Bruto/ R.I.	50	0	
8/18 3	brian - Siella Blisti	50	æ	
2/19	25tone Drive Danvers	5,0	ت	
<b>9</b> / 5	Tolman St waltham	25	00	
8/17 3	32 Trimont St Ulutham	25	00	
01 /	Prockridge va weitham	25	$\alpha$	
1/18 50	Warn + Pave E. Grenwill	180	00	
3/18 3	Suadsworth Ave. Walthan ma	25	w	
<del></del>	George Macan 8 TO mans + Waltham Ma	125	00	
	al receipts in excess of \$50 (or listed above)			
Line 10: Tot	al receipts \$50 and under* (not listed above)	-		
Line 11: TO	TAL RECEIPTS IN THE PERSON	625	60	Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized Page 2

### 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.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Am	ount
9/9/1	Market Baster	Waburn Moss	Caparing for loy	\$ 125 Leen	్రం
	·		Stanlant	1.00	
·					
				,	
-			Expenditures over \$50		·
Fr	nter on page 1, line 4		expenditures \$50 and under*		
	nized expenditures of \$50 and u	Line 14: T	OTAL EXPENDITURES	125,	00

<sup>\*</sup>If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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#### 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
-				
· · · · · · · · · · · · · · · · · · ·	·	Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	

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

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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