FILE COPY



Candidate signature (in ink)

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

CITY OF WALTHAM CITY GLERK'S DEFICE

2011 OCT 31 A II: 37

le with: ty or Town Clerk or Election Commission Please print or type all information, except signatures.	RECORDED
Fill in dates: Month Date Year Month	Date Year 2011
Type of report: (Check one) ☐8th day preceding preliminary ☐8th day preceding election ☐30 day after election ☐yea	r-end report
Stephen Rande Jr Full Name of Candidate (if applicable) Waitham School Committee Office Sought and District 93 Bed food St. Waitham MA Residential Address Tel. No. (optional) Committee To elect S Committee Name Ann Bergin Name of Committee Tr 93 Bed food St. Waitham MA Committee Mailing A	easurer ham MA 02453
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) \$	3.31 50.00 213,31 584,03 579.28 00.00 00.00
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 finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the require Signed under the penalties of perjury: Treasurer's signature (in ink)	r this reporting period and represents the
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BE	ELOW)
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 finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of 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 finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements. Signed under the penalties of perjury:	of M.G.L. c. 55. I have not received any and complete statement of all campaign this reporting period and represents the rements of M.G.L. c. 55.

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)		
9/7/2011	Stephen Rando 93 Bedford ST	2000	00			
9/26/201	y Ann Marie Carr- Readon 48 Langdon Rd NewtonMA	50	00	Title I grant Manajin Waitham public schools		
	•					
		· ·				
						
		-				
	•					
Line 9: To	otal receipts in excess of \$50 (or listed above)	2400				
Line 10: To	otal receipts \$50 and under* (not listed above)	2000 50	00			
Line 11: T	OTAL DECEMENTS IN THE	2050	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 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	Amo	unt
10/12/201	Fad Ex office	874 Lexinston ST-Waithan	Dear Friend	114	16
9/.9/2011	John Magane	15- Bowker Rd	Installing signs	200	00
9/15	John Magane	15 Bowhen Rd Weitham, MA	Installing Signs	125	50
10/18	Staples	800 Lexington 87-Weither	Envelopes	59	47
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		·		·	
·					
		·			
			Expenditures over \$50	498	63
	Enter on page 1, line 4		Expenditures \$50 and under* TOTAL EXPENDITURES	85	40

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 3

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	00.00
		Line 16:	In-kind \$50 and under	00.00
	Enter on page 1, line 6	Line 17	Total In-kind	00.00

^{*} 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)	00.00

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. Page 4