

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

| File | with: |
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| City | or To |

| | | - Programme a participa 2 Districts | • | | 1 | | ~~ ~ |
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| namen weekh Massachusetts | | | | | \Box | _ [| ĺ |
| e with: | | | | | 9 | 2 | |
| ty or Town Clerk or Election Commission | | | | | 0 | \triangleright | 泾 |
| | Please print or type all | information, except s | signatures | | | | 쿭 |
| Fill in dates: | | | | | | က္ : | |
| | | Year | Month | Date | Year | <u>u</u> | - |
| Reporting Period Beginning O | 1 01 3 | Lot Endin | g 09 | 09 | 201 | | |
| Type of report: (Check one) | <u> </u> | | | | | | \equiv |
| 8th day preceding preliminary | ☐8th day preceding ele | estion [120 days of | 1ti | ٠ | | | |
| — sur us) procuming promining | Both day preceding ele | Luon Libo day and | er election L | lyear-end report | | ssolution | \Box |
| Robert J. L | Jaddick | | 4 Jadel | ck Comm | LL | \overline{a} | |
| Full Name of Candidate | | 1 KB | Committee l | | UTC | - | |
| Councillos | Lived 6 | 16506 | . / | Un ne TTE | Trans | _ | |
| Office Sought and | COCCIDE | | ne of Committe | | 1109 | > | |
| 129 Church | 1 | 12.0 | Chuse | , , , , | | | ٠ |
| Residential Add | | | mmittee Mailir | | | - | |
| Waltran | MA 02452 | ا ا | Man | | 452 | , . | |
| | Tel. No. (optional) | | 7 | Tel. No. | | - | |
| | | | | ICE TIO. | Cobeions | ツ | |
| Line 2: Total r Line 3: Subtot Line 4: Total e Line 5: Ending Line 6: Total in Line 7: Total (a | SUMMARY BAL g balance from proceedings this period al (line 1 plus line 2) expenditures this g balance (line 3 minus lakind contribution all) outstanding lial of bank(s) used | revious report od (page 2, line 11) period (page 3, linus line 4) s this period (page 4) | \$_ \$_ \$_ ne 14) \$_ \$_ gc 4) \$_ \$_ | 7492.0 400.0 7892.0 375.5 7516.5 351.87 | 0 6 i 5 | | |
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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 n | 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 acc | cordance 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 repo | exting period. |
| Candidate without Committee OR Candidate with independent activity filing separat | te report |
| I certify that I have examined this report including attached schedules and it is, to the best of n | 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 committ | ttee in accordance with the requirements of M.G.L. c. 55. |
| Signed under the penalties of perjury: | |
| TAIR A LIGHT | alalu |
| 1 xmm / Maries | 7/9/// |
| | |

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 | | | ount | Occupation & Employer (for contributions of \$200 or more) |
|------------------|--|-------|------|--|
| 4/5/11 | Massichusetts & Lbothern Low England Laborers District Comment - 7 Laborers Way Hopkinton, MA 017t8- James Morlosi Vincert A. Mula | 250. | 00 | Constitutions of \$200 of Indre |
| | Tames Meclasi | | | |
| 7/1/11 | · Vincert A. Mula 31. Cl. 27 Boad, Wil Man MA | 150. | w | |
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| | | - | | |
| Line 9: T | otal receipts in excess of \$50 (or listed above) | 400 - | CO | |
| | otal receipts \$50 and under* (not listed above) | -100- | | |
| | OTAL RECEIPTS IN THE PERIOD | 400. | 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. 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 | Amount |
|-----------|-------------------------------------|------------|--|--------|
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| | | | | |
| | · | Line 12: 1 | Expenditures over \$50 | |
| En | ter on page 1, line 4 | | Expenditures \$50 and under* TOTAL EXPENDITURES | |

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

^{*} 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 |
|------------------|-------------------------|------------------------------|---|-----------|
| 10/21/04 | Robert J. Waldick | 124 Church St. Like Mruss | 1 6 2 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 | \$ 131.87 |
| | | | Staples, U.S. Post | : |
| 10/27/09 | Robert T. Wadde | 124 Church St ck Walthan | Postage_4.5 Post office - | \$220.00 |
| | ; | | Political Mail | |
| | | | | |
| | Enter on page 1, line 7 | Line 18: OUTSTANDING | LIABILITIES (ALL) | \$351.87 |

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