FILE CODY



Commonweakth of Massachusetts	CPF M 102: Campaign Finance R Municipal Form Office of Campaign and Political Finance	Leport College 1998 1998 1998 1998 1998 1998 1998 199
File with: City or Town Clerk or Election Commission Plea	se print or type all information, except signature	- distility
Fill in dates: Reporting Period Beginning	Dete Year Ending	
Type of report: (Check one) ■ 8th day preceding preliminary ■ 8th	h day preceding election 30 day after election	on Dyear-end report Ddissolution
SUSAN N. MONFE Full Name of Candidate (If app SCHOOL COKKIT Office Sought and District H5CLEHENTS PD Residential Address 781 891-3953	TEE ANNA LT OR Name of Cor Name of Cor NAME OF COR	nittee Name D'ANDREA mmittee Treasurer ARD WAY Mailing Address OGOL Tel. No. (optional)
Line 1: Ending bal Line 2: Total recei Line 3: Subtotal (in Line 4: Total exper Line 5: Ending bal Line 6: Total in-kine Line 7: Total (all) o	MMARY BALANCE INFORMATION lance from previous report lipts this period (page 2, line 11) me 1 plus line 2) miditures this period (page 3, line 14) lance (line 3 minus line 4) d contributions this period (page 4) mutstanding liabilities (page 4) mk(s) used BELKONT SAVIN	\$ \(\frac{1}{2} \) \$ \(250.00 \) \$ \(250.00 \) \$ \(\frac{1}{2} \) \$ \(250.00 \) \$ \(\frac{1}{2} \) \$
Affidavit of Committee Treasurer: I certify that I have examined this report including a finance activity, including all contributions, loans, recampaign finance activity of all persons acting under the finance activity a	attached schedules and it is, to the best of my knowledge and teceipts, expenditures, disbursements, in kind contributions and of the authority or on behalf of this committee in accordance with Signed under the penalties of perjury:	belief, a true and complete statement of all campaign liabilities for this reporting period and represents the the requirements of M.G.L. c. 55.

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

(CANDIDATE MOST 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 hest of my knowledge and the second schedules and it is to the hest of my knowledge and the second schedules and it is to the hest of my knowledge and the second schedules and it is to the hest of my knowledge and the second schedules and it is to the hest of my knowledge and the second schedules and it is to the hest of my knowledge and the second schedules and it is to the hest of my knowledge and the second schedules are second schedules.	F . 11
	Tel sur campaign
and the state of t	IN TOUR LIN
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 statemen finance activity, including contributions loans receipt according to the best of my knowledge and belief, a true and complete statemen	t of all campaign
finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period a 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:	; .
X APIANIA MALANTA	
X 1/0/2013	
Candidate signature (in ink)	

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 Received	(alphabetical listing required)	Amount		
91413-	REDWIN RD - WALTHAM BEDWIN RD - WALTHAM	200	00	
3013	8 EDWIN RD - WALTHAM	50	00	
		1.		
			-	
Line 9: To	Otal recoiler	Λ E	.	
Line 10: To	otal receipts \$50 and under* (not listed above)	250	00	,
Ane 11: 10	OTAL RECEIDED IN COURS	7	0	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	: Expenditures over \$50		
gree.		•	: Expenditures \$50 and under*		0
E	nter on page 1, line 4	Time 1	12. Line 13 should include only the		(20)

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not 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 From Whom Received		the committee's records and included in line 16. 1 Whom Received* Residential Address		In-kind contributions \$50 and under may		
- COLLIFER	- Address		Description of Contribution	Value		
,			CONTINUINOU			
		}				
	Managan a					
·			Strong and the second section of	* 1 star.		
		<u> </u>		•		
	•		,			
			1:			
			rule 12: 1	n-kind over \$50	2	
Enter on page 1, line 6		Line 16: 1	n-kind \$50 and under	· D		
		Line 17: 7	otal In-kind			
an in-kind	contribution is received from				10	

^{*} 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	Amonet
6/25/13 7/25/13 7/28/13 8/28/13	SUSAIN HONFETTE	45 CLEHENTS RD	MY WEBSITE CAMPAIGN LAWN SIGN MY WEBSITE SEO REAS MY WEBSITE SEO SPOTAIN	69.96
Ī	Enter on page 1, line 7	Line 18: OUTSTANDING	G LIABILITIES (ALL)	446.41

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.