



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form **FILE COPY**
Office of Campaign and Political Finance

CITY OF WALTHAM
CITY CLERK'S OFFICE

2011 SEP 12 P 2: 28

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

RECORDED

Fill in dates:

Reporting Period Beginning 5 ^{Month} 3 ^{Date} 2011 ^{Year} Ending 9 ^{Month} 2 ^{Date} 2011 ^{Year}

Type of report: (Check one)

8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Albert D. Bakalis

Full Name of Candidate (if applicable)

WARD 8 City Councillor

Office Sought and District

20 PARK ST

Residential Address

WALTHAM MA

Tel. No. (optional)

NONE

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>0</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>215.62</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>215.62</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>215.62</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>0</u>

Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>215.62</u>
Line 8: Name of bank(s) used	<u>NONE</u>

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)

Date

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 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 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:

Albert D. Bakalis

Candidate signature (in ink)

9/10/2011

Date

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 number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8/5/11	Albert Bakalis 20PARK ST	215 62	DRIVER/VETERANS TAXI
Line 9: Total receipts in excess of \$50 (or listed above)		215 62	Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		215 62	

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

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 number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
8/5/2011	Utopia Cleaners.	Newton 2056 Comm Nwst	To Clean Suits For Television CH8	24	40
8/5/2011	STAPLES	Brighton 1660 Soldier Field	White Board For Television CH8	180	61
8/5/2011	STAPLES	Brighton 1660 Soldier Field	MARKET + ACCES For Television CH8	10	61
Line 12: Expenditures over \$50				180	61
Line 13: Expenditures \$50 and under*				35	01
Line 14: TOTAL EXPENDITURES				215	62

Enter on page 1, line 4

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

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
Enter on page 1, line 6			Line 15: In-kind over \$50	0
			Line 16: In-kind \$50 and under	0
			Line 17: Total In-kind	0

* 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
8/5/11	Albert Bakala's	20 PARK ST	Fund Campaign	215.62
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	215.62



that was easy.

Low prices. Every item. Every day.
1660 Soldiers Field Road
BRIGHTON, MA 02135
(617) 254-4822

SALE 1334639 7 003 51576
0001 08/05/11 09:20
QTY SKU PRICE

REWARDS NUMBER 2096706847

1 ULTIMA EASEL DE/PA
370660 169.99
SUBTOTAL 169.99

Standard Tax @ 6.25% 10.62

TOTAL \$180.61

Novus 180.61
Card No.: XXXXXXXXXXXX4706 [S]
Auth No.: 00542R

TOTAL ITEMS 1

Compare and Save
with Staples-brand products.

THANK YOU FOR SHOPPING AT STAPLES !

Shop online at www.staples.com

Save all season long! Buy a
Back to School Savings Pass
and get 15% off school supplies now
through 9/17. Some exclusions apply.
See an associate for details.



ADB



that was easy.

Low prices. Every item. Every day.
1660 Soldiers Field Road
BRIGHTON, MA 02135
(617) 254-4822

SALE 1334639 7 003 51577
0001 08/05/11 09:20
QTY SKU PRICE

REWARDS NUMBER 2096706847

1 ACCESSORY PACK
026426659677 9.99
SUBTOTAL 9.99

Standard Tax @ 6.25% 0.62

TOTAL \$10.61

Cash 11.00
Cash Change 0.39

TOTAL ITEMS 1

Compare and Save
with Staples-brand products.

THANK YOU FOR SHOPPING AT STAPLES !

Shop online at www.staples.com

Save all season long! Buy a
Back to School Savings Pass
and get 15% off school supplies now
through 9/17. Some exclusions apply.
See an associate for details.



ADB

YOUR ENVIRONMENTALLY FRIENDLY CLEANER

Utopia Cleaners
2056 Commonwealth Ave.
Auburndale, MA 02400
(017) 630-1122
Fri 8/5/2011 04:19 PM

READY BY: WED 8/10/2011 03:00 PM

67458



Bakalis, Albert
(781) 647-9597

06433

0 2 2pc. Men Suit

\$24.40

4 PCS : [D]4

SUBTOTAL : \$24.40

TOTAL : \$24.40

4 PCS

BALANCE : \$24.40

Business Hour

7:00 am - 6:30 pm (M-F)

8:00 am - 5:00 pm (Sat.)

WED

AOB