

Form CPF M 102: Campaign Finance Report OF WALTHAM OLTY CLERK'S OFFICE Municipal Form Office of Campaign and Political Finance

2011 IAN - 6 P 12: 43

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e with: ty or Town Clerk or Election Commission Plea	se print or type all informatio		RECORDED	
Fill in dates: Reporting Period Beginning	Date Year	Ending 12	Date 3	<u>2010</u>
Type of report: (Check one) ☐8th day preceding preliminary ☐8th	h day preceding election	30 day after election	Xyear-end report	dissolution
Residential Address	plicable)	Mitter to Electory Committee Name of Committee Committee Ma 78 506	ee Name U C C C ittee Treasurer C C Address C Address C C C C C C C C C	(optional)
Line 1: Ending bath Line 2: Total reconstruction in Line 3: Subtotal (Line 4: Total explaine 5: Ending bath Line 6: Total in-kith Line 7: Total (all)	JMMARY BALANCE In alance from previous eipts this period (page 2) line 1 plus line 2) enditures this period alance (line 3 minus line 4) and contributions this poutstanding liabilities bank(s) used water to	report 2, line 11) (page 3, line 14) period (page 4) (page 4)	\$ 665.00 \$ 365.00 \$ 965.00 \$ 965.00 \$ 0.00 \$	
Affidavit of Committee Treasurer: I certify that I have examined this report including finance activity, including all contributions, loans campaign finance activity of all persons acting until the committee of	e receinte expenditures, disbutscincilis	i, in-kind contributions and italiant in accordance with the contributions and italiant in the contribution in the contrib	tottines for mis tehorimi	S bettoe mie tehreneren nu
FOR CANI	DIDATE FILINGS ONL	Y: (CANDIDATE MUST	SIGN BELOW)	
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity I certify that I have examined this report includ finance activity, of all persons acting under the contributions, incurred any liabilities nor made Candidate without Committee OR Candi I certify that I have examined this report includ finance activity, including contributions, loans, campaign finance activity of all persons acting	ing attached schedules and it is, to the lauthority or on behalf of this committee any expenditures on my behalf during the date with independent activity filling ling attached schedules and it is, to the processory expenditures disbursements.	ee in accordance with the requisits period. separate report best of my knowledge and be in-kind contributions and lia committee in accordance with	lief, a true and complete	statement of all campaign

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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 eceived	(* Paradettal noting required)		unt	Occupation & Employer (for contributions of \$200 or more)		
01/86/0	Vincort A. Mola 31011 ff Road	acn.	\sim	Dresident		
•	Wa Hran, MA 02452			Boston Benklaraconti 135 Elmstree F Waltham MA02453		
	<u> </u>			781 647 - 7500		
	·					
				<u> </u>		
· · · · · · · · · · · · · · · · · · ·						
Line 9:	Total receipts in excess of \$50 (or listed above)	200.	00			
Line 10:	Total receipts \$50 and under* (not listed above)	0.	OC			
Line 11:	TOTAL RECEIPTS IN THE PERIOD	200	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

None

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	
N/A					
,			·		
			·		
		·	·		
		·			
			2: Expenditures over \$50	Ö.	00
	Enter on page 1, line 4		3: Expenditures \$50 and under* 4:TOTAL EXPENDITURES	-0	X

*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

Nane

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
NA				
	.1:	Line 15:	In-kind over \$50	0.00
		Line 16:	In-kind \$50 and under	0.00
	Enter on page 1, line 6	Line 17:	Total In-kind	100C

^{*} 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

None

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
MA				
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	,			
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	0.00

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