

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

2019 OCT 28 P 4: 58

of Massachusetts	
File with: City or Town Clerk or Election Commission	NECONDED
Please print or type all information, except signatures.	<b>(</b> )
Fill in dates:    Month   Date   Year   Month   Date   Reporting Period Beginning   O   O   Date   Ending   O   Z   Z   Z   Z   Z   Z   Z   Z   Z	2019
Type of report: (Check one)  ☐8th day preceding preliminary  8th day preceding election ☐30 day after election ☐ year-en	ad report
Full-Name of Candidate (if applicable)  Waltham School Committee  Office Sought and District  Los South St  Residential Address  Committee Name  Terence Magi	Waltkim Mt 02453
SUMMARY BALANCE INFORMATION:  Line 1: Ending balance from previous report  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)  Line 8: Name of bank(s) used Watertown Savings Ba	0.01 0.61 2.40 7.61
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 confinance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this recampaign 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:  Treasurer's signature (in ink)  Date	eporting period and represents the of M.G.L. c. 55.
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW	y)
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 co finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G. 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 co finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this recampaign 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:  Candidate signature (in ink)	omplete statement of all campaign sporting period and represents the

## 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 lumize 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)	Amo	unt	Occupation & Employer (for contributions of \$200 or more)
Received	(aipmabetical issuing requires)			,
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			-	
		-		
	and the second s			
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×				
	*			,
Line 9: To	otal receipts in excess of \$50 (or listed above)	0		
	otal receipts \$50 and under* (not listed above)	0		
	OTAL RECEIPTS IN THE PERIOD	0		Enter on page 1, line 2

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

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## **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	Amo	unt
9/ /					
8/21/19	Waltham Access Chann	d	3 month ad	\$ 300	00
10/17/19	Waltham Access Chann Field Companies I	r 650 Pleasant St	mailing	\$ 300 \$2612	40
/	r		J		
	·				
	·				
ı					+
			,		
		Line 12:	Expenditures over \$50	29/2	40
			Expenditures \$50 and under*		0
	Enter on page 1, line 4		TOTAL EXPENDITURES	1 1 1 1 1 1 1 1	40

<sup>\*</sup>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

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

<sup>\*</sup> 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
8/14/19	Margaret Donn	elly 665 South St	Loan	3,000
1 ( •				~~
			- '	
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	

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.

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