# CITY OF WALTHAM CITY CLERK'S OFFICE



## Form CPF M 102: Campaign Finance Report

	Municipal Form  Office of Campaign and Folitical F	nenee
Anamouwadh (Masadasata	Site of State of Stat	RECORDED
File with Uity or Town Clerk or Elexion Commission	Please print or type all information, ex	cept signatures.
Fill in dates: Reporting Parlod Beginning	Flash Date Tax	Ending 10/30/2017
Type of report: (Check one)	y ■8th day preceding election □20 d	y after election Dyear end report Edissolation
Fall Name of Candid COUNCILLOR W Office Sought a	ate (if applies ble)  IARD 3  STE  and District  WALTHAM MA  93 I	Committee Name PHEN DONESKI Name of Committee Tressurer HDBBS RD, WALTHAM MA Committee Mailing Address
	Tel. No. (optional)	Tel. No. (optional)
Line 2: Tot Line 3: Sub Line 4: Tot Line 5: End Line 6: Tota Line 7: Tota	SUMMARY BALANCE INFO ling balance from previous rep al receipts this period (page 2, line total (line 1 plus line 2) al expenditures this period (page ding balance (line 3 minus line 4) al in-kind contributions this period al (all) outstanding liabilities (page the of bank(s) used DIGITAL I	oorf \$ 2,083,30 e 11) \$ 0 \$ 2,083,30 ge 3, line 14) \$ 954,28 \$ 1,129.02 od (page 4) \$ 0 e 4) \$ 0
finance activity, including all contrib campaign finance activity of alliperso  These area of signature (in ink)	port including attached schedules and it is, to the oest of utions, loans, receipts, expenditures, disbursements, in-kipors acting under the authority or on behalf of this committee of the comm	10-30-17 Date
FOI	R CANDIDATE FILINGS ONLY:	(CANDIDATE MUST SIGN BELOW)
I certify that I have examined this t finance activity, of all persons act contributions, incurred any liabiliti Candidate without Committee	of no activity independent of the commuter report including attached scheduler and it is, to the best of an under the authority or on behalf of this committee in the conformation any expenditures on my behalf during this re- e OK Candidate with independent activity name of the report including attached scheduler and it is, to the best of	f my knowledge and belief, a true and complete statement of all campaign accordance with the requirements of M.G.L. c. 55. Thave not received any portling period.  The report of my knowledge and belief, a true and complete statement of all campaign and contributions and liabilities for this reporting period and represents the nittee in accordance with the requirements of M.G.L. c. 55.

Signed under the pensities of perjury:

10/30/2017

#### 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)	
	-				
	•				
9					
Line 9:	Total receipts in excess of \$50 (or listed above)				
Line 10:	Total receipts \$50 and under* (not listed above)				
Line 11:	TOTAL RECEIPTS IN THE PERIOD	Ò		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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amo	unt
1/10/17	STAPLES	800 LEXINGTON ST WALTHAM MA	FLYERS	i	05
2/2/17	STAPLES	800 LEXINCTON ST WALTHAM MA	FLYER5		28
4/13/17	STAPLES	800 LEXINGTON SI WALTHAM MA	- FLYERS -	31	86
817/17	STAPLES	800 LEXINATION ST WALTHAM MA	FLYERS	21	97
8/7/17	STAPLES	800 LEXINGTON ST WALTHAM MA	FLYERS	6	66
8/17/17	STAPLES	800 LEXINGTON ST WALTHAM MA	FLYERS	77	57
8/17/17	STAPLES	800 LEXINGTON ST WALTHAM MA	FLYERS	83	32
8/17/17	STAPLES	800 LEXINGTON ST WALTHAM MA	FLYERS	٥	23
8/28/17	STAPLES	800 LEXINGTON ST WALTYAM MA	FLYERS	7	56
7/25/17	STAPLES	800 LEXINGTON ST WALTHAM MA	FLYERS	78	
10/8/17	STAPLES	800 LEXINGTON ST WALTHAM MA	FLYERS	47	22
10/8/17	STAPLES	800 LEXINGTON ST WALTHAM MA	FLYERS	1	75
10/16/17	usps	854 LEXINGTON ST WARTHAM MA	STAMPS	29	40
10/18/17	STAPLES	800 LEXINGTON ST WALTHAM MA	FLYERS	23	42
0/18/17	STAPLES	800 LEXINGTON ST WAUTHAM MA	FLYERS	70	36
10/18/17	STAPLES	GOO LEXINGTON ST WALTHAM MA	FLYERS	26	03
		1	Expenditures over \$50		
		Line 13:	Expenditures \$50 and under*	Lestuce V	<u> </u>
]	Enter on page 1, line 4	The state of the s	TOTAL EXPENDITURES		-

<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. Page 3

## 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	
10/20/17	STAPLES	800 LEXINGTON ST WALTHAM MA	SUPPLIES	62	81
10/22/17	STAPLES	800 LEYINGTON ST. WALTUAM MA	FLYERS	73	82
10/22/17	STAPLES	800 LEXINGTON ST WALTHAM MA	FUERS	11	69
10/22/17	STAPLES	800 LEXINGTON ST WALTHAM MA	FLYERS	0	93
0/23/17	USPS	492 TRAPELO RA BELMONT MA	STAMPS	111	72
0/25/17	STAPLES	800 LEXINGTON ST WALTHAM MA	FLYERS	36	09
10/26/17	USPS	854 LEXINGTONST WALTHAM MA	STAMPS	63	70
0/26/17	Staples	800 LEXINGTON ST.	FLYERS	55	78
10/26/17	STAPLES	800 LEXINGTON ST WALTHAM MA	FLYERS	28	10
				•	
		·	·		
		·			
		Line 12:	Expenditures over \$50	954	28
			Expenditures \$50 and under*	101	
	Enter on page 1, line 4	Line 14:	TOTAL EXPENDITURES	964	28

<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. 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
	_			
	<b></b>			
			•	
	10			
•	,			
e.		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
Enter on page 1, line 6		Line 17	: Total In-kind	0

<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
	·			1
				:
•				
			·	
	Enter on page 1, line 7	Line 18: OUTSTANDING LIABILITIES (ALL)		0