

Form CPF M 102: Campaign Finance Report **Municipal Form**

Commonwoolih	paigh and Political Finance
of Massachusert§ 921 JAN 19 P 3: 113	File with: City or Town Clerk or Election Commissio
Fill in Reporting Period dates: Beginning Date:	20 20 Ending Date: 12 31 2020
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution
JANE ROCHE GATELY Candidate Full Name (if applicable)	JANE GATELY COMMITTEE Committee Name
SCHOOL COMMITTEE	MARK A. GATELY
Office Sought and District 222 TOTTEN POND RD, WALTHAM, MA 02451 Residential Address	Name of Committee Treasurer 222 TOTTEN POND RD, WALTHAM, MA 02 451
E-mail: gately i Over 120n. net	E-mail: gatelyjo Verizon. net
Phone # (optional): 781-891-4773	Phone # (optional): 781 - 891 - 4773
SUMMARY BALANCE	INFORMATION:
Line 1: Ending Balance from previous report	2233.66
Line 2: Total receipts this period (page 3, line 11)	ϕ
Line 3: Subtotal (line 1 plus line 2)	2233.66
Line 4: Total expenditures this period (page 5, line	14) 980.82
Line 5: Ending Balance (line 3 minus line 4)	1252.84
Line 6: Total in-kind contributions this period (page	e 6) Ø
Line 7: Total (all) outstanding liabilities (page 7)	ϕ
Line 8: Name of bank(s) used: Rockland	BANK
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind continuance activity of all persons acting under the authority or on behalf of this committee in acc Signed under the penalties of perjury:	cordance with the requirements of M.G.L. c. 55.
	1/11/402/
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the best activity, of all persons acting under the authority or on behalf of this committee in accordincurred any liabilities nor made any expenditures on my behalf during this reporting per	st of my knowledge and belief, a true and complete statement of all campaign finance
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the best finance activity, including contributions, loans, receipts, expenditures, disbursements, incampaign finance activity of all persons acting under the authority or on behalf of this ca	st of my knowledge and belief, a true and complete statement of all campaign
signed under the penalties of perjury: And	(Candidate's signature) Date: 1/20/2021

SCHEDULE A: RECEIPTS JANE GATELY 1/20 /2021

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.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Peport all receipts. Please include your committee name and a Name and Residential Address Date Received (alphabetical listing required)		lential Address Occupation & 1			
Date Received	(aiphabetical listing required)	Amount	(for contributions of \$2	oo or more)	
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ine 9: Total Receipt	ts over \$50 (or listed above)	$ \phi $			
ing 10. Total Description	to \$50 and and -* (+ 1: 1 -1)				
ine 10: 10tal Receip	ts \$50 and under* (not listed above)	Ψ			
11. TOTAL DI	CCEIPTS IN THE PERIOD	(h)	Enter on page 1, line 2	pg. 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.

SCHEDULE B: EXPENDITURES (continued) JANE GATELY

SCHEDULE B. EXPENDITURES (continued) JANE CITY 1/20/202/				
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
2/25/20	Friends of the Waltham Family School	510 MOODY ST. WALTHAM, MA 02453	DONATION CHARITY	\$ 150,00
11/24/20	Friends of the Waltham Family School	510 MOODY ST. WALTHAM, MA 02453	DONATION CHARITY	\$ 100.00
5/27/20	Healthy Waltham	510 MOODY ST. WALTHAM, MA OZ 453	DONATION CHARITY	\$ 50,00
1/21/20	JANER, GATELY	222 TOTTEN FOND RD. WALTHAM, MA 02451	REIMBURSEMENT- LOAN TO COMMITTEE	\$502.82
8/18/20	The Stanley Committee	19 Neighbors Lane Waltham, MM 02453	POLITICAL COMMITTEE DONATION	\$ 50.00
8/20/20	Waltham News Tribune	9 Merriam St. Lexington, MM 02420	NEWSPAPER	\$78.00
12/21/20	Waltham Partnership For Youth	617 Lexington St. Waltham, MA 02452	DONATION CHARITY	\$50.00
		Line 12: Expenditures over \$50	(or listed above)	\$830.82
		Line 13: Expenditures \$50 and u	under* (not listed above)	\$ 150,00
	·	Line 14: TOTAL EXPENDITU		\$980.82

^{*} 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 JANE GATELY (20/2021

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 on page 1.

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Date Received	From Whom Received*	Residential Address	Description of Contribution	Value

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<u> </u>	La company of the second secon	Lina 15: In Vind Contributions	over \$50 (or listed above)	
		Line 15: In-Kind Contributions		The state of the s
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	ϕ

^{*} 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 addres of the contributor: in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer. P9, 4

SCHEDULE D: LIABILITIES JANE GATELY 1/20/2021

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as we as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
				NOTIFICATION AND ADMINISTRATION ADMINISTRATION ADMINISTRATION AND ADMI
		Line 18: TOTAL OUTSTAND		