

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF WALTHAM

Fill in Reporting Period dates: Beginning Date: 1/1/20	020 Ending Date: 12/31/2020
Type of Report: (Check one) [8th day preceding preliminary	☐ 30 day after election
The Joe Vizard Committee Candidate Full Name (if applicable) Councillor At-Large Office Sought and District 273 Main Street Residential Address E-mail: Phone # (optional):	The Joe Vizard Committee Committee Name George Carroll Name of Committee Treasurer 273 Main St. Waltham, MA Committee Mailing Address E-mail: Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	\$8,146.99
Line 2: Total receipts this period (page 3, line 11)) 0
Line 3: Subtotal (line 1 plus line 2)	\$8,146.99
Line 4: Total expenditures this period (page 5, lin	ne 14) \$8,146.99
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (pa	age 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: Watertown Savings	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the bes activity, including all contributions, loans, receipts, expenditures, disburs (neats in-kind finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date / / / - Z/
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in activity and liabilities nor made any expenditures on my behalf during this reporting	the best of my knowledge and belief, a true and complete statement of all campaign finance occordance with the requirements of M.G.L. c. 55. I have not received any contributions, g period that are not otherwise disclosed in this report.
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	ts, in-kind contributions and liabilities for this reporting period and represents the ais candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the papalties of parityry	Date: // 17/2021

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD	L	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.

SCHEDULE B: EXPENDITURES (continued)

To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
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<u> </u>					
		Line 12: Expenditures over \$50	(or listed above)		
		Enic 12. Expenditures over \$50	(or fisied above)		
		Line 13: Expenditures \$50 and	under* (not listed above)		
	Entor on maga 1 1ima 4 >	Line 14: TOTAL EXPENDIT	TIDES IN THE DEDIOD		
. 10		i	hould include only those expenditure		

^{*} 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 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	
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