

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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	File with: City of Town Clerk of Election Commission
Fill in Reporting Period dates: Beginning Date: 7/2	21/2018 Ending Date: 12/31/2018 RECORDED
Type of Report: (Check one)	<i>y</i>
	☐ 30 day after election 💢 year-end report 🔀 dissolution
☐ 8th day preceding preliminary ☐ 8th day preceding election	☐ 30 day after election ☐ year-end report ☑ dissolution
ADAM CROSSMAN	CROSSMAN FOR WALTHAM WARD 6
Candidate Full Name (if applicable)	Committee Name
WALTHAM CITY COUNCIL - WARD 6	MEGHAN CROSSMAN
Office Sought and District	Name of Committee Treasurer
12 LINDEN TERR, WALTHAM, MA 02452	12 LINDEN TERR, WALTHAM, MA 02452
Residential Address	Committee Mailing Address
E-mail: adam crossman720 Small.com	E-mail:
Phone # (optional): 7742185846	Phone # (optional):
SIIMMADV RALAN	NCE INFORMATION:
•	49.26
Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 1	11) 53.74
Line 3: Subtotal (line 1 plus line 2)	103
Line 4: Total expenditures this period (page 5,	line 14) 103
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (	(page 6) 0
Line 7: Total (all) outstanding liabilities (page	0
Line 8: Name of bank(s) used: ALLY BANK	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the activity, including all contributions, loans, receipts, expenditures, disbursements, in-ki finance activity of all persons acting under the authority or on behalf of this committee.  Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check in the certain part of the committee).	(Treasurer's signature)  Date: 1/8/2019
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 activity, of all persons acting under the authority or on behalf of this committee in incurred any liabilities nor made any expenditures on my behalf during this report	to the best of my knowledge and belief, a true and complete statement of all campaign finance in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, orting period.
Candidate without Committee OR Candidate with independent activity filin  I certify that I have examined this report including attached schedules and it is, to finance activity, including contributions, loans, receipts, expenditures, disbursem campaign finance activity of all persons acting under the authority or on behalf or	to the best of my knowledge and belief, a true and complete statement of an campaign
Signed under the penalties of perjury:	(Candidate's signature) Date: 1/8/2019

## 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.

(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.)

report all receipts.	Please include your committee name and a pa	ge number on ea	cn page.)	
	Name and Residential Address		Occupation & Employer	
<b>Date Received</b>	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
7/19/2018	CATHERINE HOYT, 15 LEXINGTON TERR, WALTHAM, MA 02452	50		
8/7/2018	adam crossman, 12 linden ter, waltham, ma 02452 (loan)	3.74		
Line 9: Total Rec	eipts over \$50 (or listed above)	50		
Line 10: Total Rec	reipts \$50 and under* (not listed above)	3.74		
Line 11: TOTAL RECEIPTS IN THE PERIOD  53.74  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.				

<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.

# SCHEDULE A: RECEIPTS (continued)

	Name and Residential Address Occupation & Employer					
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)			
Date Received	(arphabeteur about 10 famous)					
	i.					
Line 9: Total Rece	ripts over \$50 (or listed above)					
Line 10: Total Rec	eipts \$50 and under* (not listed above)					
	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2			
Line II: IOIAL		0 1: 10-1	ld include only those receipts not itemized above.			

<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.

#### 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.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
8/7/2018	market basket	110 market pl dr, waltham, ma 02451	food for volunteers	35
	squarespace	225 varick st, 12th fl, ny, ny	website hosting	
7/19/2018	squarespace	10014		26
7/20/2018	usps	854 lexington st, waltham, ma 02452	stamps	42
				,
Line 12: Total Expenditures over \$50 (or listed above)  Line 13: Total Expenditures \$50 and under* (not listed above)			10	
	Enter on page 1, line 4 →			10

<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 Page 4 above.

#### SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
			_			
	,					
				÷.		
			·			
	я					
		Line 12: Expenditures over \$50	(or listed above)			
		Line 13: Expenditures \$50 and t	under* (not listed above)			
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD			
	10,		apuld include only those expenditure			

<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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
8/7/2018	adam crossman pricing manager, dentsply sirona	12 linden terr, waltham, ma 02452	forgive campaign loan	403.74
		,		
7				
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	403.74
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	C
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS [	403.74

<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.

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# 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
		,		
		,		
_				
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	

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