

# Form CPF M 102: Campaign Finance Report LIHAM Municipal Form

Office of Campaign and Political Finance Jan 16 P 2:20

RECORDED

		NEGUND	CU
File with: City or Town Clerk or Election Commission		Section 1	12/27/201
Reporting Period - Beginning: 1/1/2018	Ending:	12/31/2018	
Type of report: Year-end			
William Fowler	Commit	tee to Elect Bill	l Fowler
Full Name of Candidate			
Waltham Councillor, Ward 2	Peter Cohn, Jr.		
Office Sought/ District	Name of Committee Treasurer		urer
54 Lincoln Street	54 Lincoln Street		et
Waltham, MA 02451		Waltham, MA 024	51
Residential Address		Committee Address	
SUMMARY BALANCE  Ending Balance from previous report Total receipts this period: Subtotal: Total expenditures this period: Ending Balance: Total inkind contributions this per Total outstanding liabilities: Name of bank(s) used: East Cambre	: iod:	\$8,219. \$0. \$8,219. \$65. \$8,153. \$0. \$3,000.	00 04 28 76
Affidavit of Committee Treasurer:  I certify that I have examined this report, including attached schobelief, a true and complete statement of all campaign finance activexpenditures, disbursements, inkind contributions and liabilities finance activity of all persons acting under the authority or on be requirements of M.G.h. c. 55.  Signed under the penalties of perjury:	rity includir for this repo	ng all contributions, le orting period and repre	oans, receipts, sents the campaign
KG (in int)		) . 13	3   9
Treasurér's signature (in ink)			2000
Affidavit of Candidate (check 1 box only):  Candidate with Committee and no activity independent of	the commi	ttee	
I certify that I have examined this report, and attached schedules true and complete statement of all campaign finance activity, of all this committee in accordance with the requirements of M.G.L. c. 55. any liabilities nor made any expenditures on my behalf during this	and it is, t I persons ac I have not	to the best of my knowle eting under the authori- received any contribut	ty or on behalf of

Candidate without Committee OR candidate with independent activity filing separate report.

1 certify that 1 have examined this report and attached schedules and it is, to the best of my knowledge and belief,

a true and complete statement of all campaign finance activity including contributions, loans, receipts, expenditures, disbursements, inkind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

William Toul

1/6/19

### Schedule A: Receipts

m.c.h. 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.

Date	Name and Residential Address	Amount	Occupation and Employer
IOLAÍ ILEM	mized Receipts	\$0.00	
Total Unit	temized Receipts	\$0.00	
Total Rece	<u> jpts</u>	<b>\$0.0</b> 0	

## Schedule B: Expenditures

Expenditures over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
10/18/2018	Staples 300 Lexington Street Waltham, MA 02451	\$16.95	Copies
	zed Expenditures mized Expenditures ditures	\$16.95 \$48.33 \$65.28	

### Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind contributions of more than \$50. In-kind contributions \$50 and index may be added together, from the committee's records, and included in line 16. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employed of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description Geographion/Employer
Tuhal Them	ized Inkind Contributions	\$0.00	
Total Unit	emized Inkind Contributions	\$0.00	
Total Inki	nd Contributions	<b>\$0.</b> 00	

## Schedule D: Liabilities

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

Date	To Whom Due	Amount	Purpose
5/31/2013	Fowler (Loan), William 54 Lincoln Street Waltham, MA 02451	\$3,000.00	Loan from candidate
Total Outst	anding Liabilities	\$3,000.0u	