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Form CPF M 102: Campaign Finance Report of the Little Manager Company of the Comp Municipal Form Office of Campaign and Political Finance

2018 OCT 24 P 1/21

Please print or type all information, except signature Month Performance Please print or type all information, except signature Performance Please Print or type all information, except signature Performance Please print or type all information, except signature Performance Please Print or type all information, except signature Performance Please Print or type all information, except signature Performance Please Print or type all information, except signature Performance Please Print or type all information, except signature Performance Please Print or type all information, except signature Performance Please Print or type all information, except signature Performance Please Print or type all information, except signature Performance Please Print or type all information, except signature Performance Please Print or type all information, except signature Performance Please Print or type all information, except signature Performance Please Print or type all information, except signature Performance Please Print or type all information, except signature Performance Please Print or type all information, except signature Performance Please P	h Date Year 2013
Fill in dates: Reporting Period Beginning Date Year Month 2013 Ending / C Type of report: (Check one) 18th day preceding preliminary 18th day preceding election 130 day after el	h Date Year 2013
Reporting Period Beginning 2013 Ending /C Type of report: (Check one) Sth day preceding preliminary 128th day preceding election 130 day after election 130	19 2013
18th day preceding preliminary ■8th day preceding election □30 day after electi	on Ovear-end report Odissolution
Robert J Cincath RLITC.	
Full Name of Candidate (if applicable) Councilor - at - Large Office Sought and District 23 Dix St. Unit 1 Com Name of Co 23 Dix St.	mittee Name Cin Cotta mittee Name Cin Cotta minittee Treasurer Unif 1 e Mailing Address A 02433 Tel. No. (optional)
SUMMARY BALANCE INFORMATION Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used	S O S O S O S O S O S O S O S O S O S O
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions at campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance. Signed under the penalties of perjury: Treasurer's signature (in ink)	ad lightliffing for this properties a point and account
FOR CANDIDATE FILINGS ONLY: (CANDIDATE M	UST SIGN BELOW)
Affidavit of Candidate: (check 1 box only)	

a 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 the best of my knowledge and belief, a true and complete statement of all compaign
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. I have not received any
contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.
Candidate without Committee OR Candidate with independent activity filling separate report
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all compaign
mance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind 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.
Signad under the navelity of saling

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 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	112Ine and Wacidamathat A 1 1	Amount		Occupation & Employer (for contributions of \$200 or more	
				stations of \$200 or more	
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ine 9: To	otal receipts in excess of \$50 (or listed above)		·		
ine 10: To	otal receipts \$50 and under* (not listed above)			_	
ine 11: T(TAL DECEIPEG IN MY				
	temized receipts of \$50 and under include them in line			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.

Page 2

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)	are required to report all expend	Purpose of Expenditure	Am	Amount	
					T	
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			,			
					-	
					 	
					<u> </u>	
		·				
,		Line 12: Expenditures over \$50				
Er	nter on page 1, line 4	Line	13: Expenditures \$50 and under* 14:TOTAL EXPENDITURES		 '	

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not litemized 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
the first of soul rest fragments a				
****	·			
•				
VI		Line 15:	In-kind over \$50	
	Entonon		In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	

^{*} 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
12/7/05	Robert J. Cincolla	23 Dix St. UnitI Waltham MA	Mailing Expenses	717.67
				
,				
	·			
		` `		
•	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	717,67

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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