

Form CPF M 102: Campaign Finance Report 15 MALTHAM OLTY CLERKS OF SIGN

Municipal Form

Office of Campaign and Political Finance

2013 DEF 28 A. S. U.L.

th:	- ALCOADED
Town Clerk or Election Commission Please print or type all information, except signatures	S.
ill in dates: Month Date Year Month eporting Period Beginning Tu/y 1 2013 Ending Octob	her 19 2013
ype of report: (Check one) 18th day preceding preliminary ■8th day preceding election □30 day after election	n □year-end report □dissc
Councillor-At-Large, Waltham	nittee Name NA nmittee Treasurer
Residential Address 734-476-2152 Tel. No. (optional)	Mailing Address Tel. No. (optional)
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	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
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 are campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance vision and activity of all persons acting under the authority or on behalf of this committee in accordance visions. Signed under the penalties of perjury:	nd habilities for this reporting period and
Treasurer's signature (in ink)	Date
FOR CANDIDATE FILINGS ONLY: (CANDIDATE M	

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 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. Thave 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 filing 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 campaign finance 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.

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.

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

Date Received	Name and Residential Address (alphabetical listing required)		ount	Occupation & Employer (for contributions of \$200 or more	
N/A-	-N/A-	0.	00	NA	
Acceptance Annual Annua					
			<u> </u>		
				-	
		, and the second			
	•				
			<u> </u>		
Line 9: 7	Total receipts in excess of \$50 (or listed above)	0.	à	-	
Line 10: 7	Total receipts \$50 and under* (not listed above)	1	00		
Line 11: 7	TOTAL RECEIPTS IN THE PERIOD		00	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

(alphabetical listing) N/A		N/A.	N/A	0	.00
					
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iter on page 1. line 4					00
	nter on page 1, line 4	nter on page 1, line 4	Line 12: Line 13: Line 13:	Line 12: Expenditures over \$50 Line 13: Expenditures \$50 and under on page 1, line 4	Line 12: Expenditures over \$50 Line 13: Expenditures \$50 and under \$50

^{*}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

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
7/1-11/6	Clarence Richardson	60 Alder St. Waltham, MA	use of website	\$20,00
en an empris — was, and regularly w				
`		,		
E].	Line 15	: In-kind over \$50	
	:	Line 16	: In-kind \$50 and under	\$20.00
	Enter on page 1, line 6	Line 1	7: Total In-kind	\$20.00

^{*} 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
N/A	NA	NA	N/A	0.00
				-

	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	0.00

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