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Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF WALTHAM
CITY CLERK'S OFFICE

2015 OCT 26 AM 11:10

RECORDED

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning Month May Day 1 Year 2015 Ending Month October Day 26 Year 2015

Type of report: (Check one)

☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Elizabeth A. Jammal
Full Name of Candidate (if applicable)
School Committee, Waltham
Office Sought and District
69 Potter Road, Waltham MA 02453
Residential Address
617-212-8298
Tel. No. (optional)

Committee to Elect Liz A. Jammal
Committee Name
Susan G. Sutherland
Name of Committee Treasurer
71 Ellery Road, Waltham MA 02453
Committee Mailing Address
617-549-6374
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ N/A
Line 2: Total receipts this period (page 2, line 11) \$ 3,766.42
Line 3: Subtotal (line 1 plus line 2) \$ 3,766.42
Line 4: Total expenditures this period (page 3, line 14) \$ 3,677.62
Line 5: Ending balance (line 3 minus line 4) \$ 88.80
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 Watertown Savings Bank

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 belief, a true and complete statement of all campaign finance activity, including all 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.

Signed under the penalties of perjury:

Susan G. Sutherland
Treasurer's signature (in ink)

October 26, 2015
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ 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. 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 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.

Signed under the penalties of perjury:

Elizabeth A. Jammal
Candidate signature (in ink)

10/26/15
Date

Committee to Elect Liz A. Jammal page 1

SCHEDULE A: RECEIPTS

-Page 1 of 2

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 number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5-1-15	Liz AlTammal (Loan)	120 00	Candidate
7-9-15	Liz AlTammal	1,282 97	Candidate
9-11-15	Liz AlTammal (Loan)	94 56	Candidate
9-15-15	Liz AlTammal	752 25	Candidate
9-16-15	Liz AlTammal (Loan)	50 86	Candidate
9-29-15	Liz AlTammal	70 00	Candidate
10-5-15	Liz AlTammal (Loan)	105 00	Candidate
10-21-15	Liz AlTammal (Loan)	105 00	Candidate
10-21-15	Liz AlTammal (Loan)	310 78	Candidate
9-15-15	Muhammed AlTammal	100 00	
10-22-15	David J. Barber	100 00	
9-28-15	Abdullah Tammal	100 00	
9-21-15	Ari Koufos	100 00	
10-4-15	Martina Lambie	100 00	
8-26-15	Karen Lown	50 00	
Line 9: Total receipts in excess of \$50 (or listed above)		3766 42	* Includes items from page 2
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		3766 42	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.

10f Page 2

Committee to Elect Liz AlTammal page 2

SCHEDULE A: RECEIPTS

Page 2 of 2

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 number on each page.

[illegible]

* 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 of 2

Committee to Eket Liz AlJammal page 3

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 number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
10-23-15	Elizabeth A. Tammi	69 Potter Road Waltham, MA 02453	Loan Reimbursement	786	20
9-19-15	Connolly Printing	16 Gill St. Woburn, MA 01801	Signage	1282	97
9-15-15	Connolly Printing	16 Gill St. Woburn, MA 01801	Print/Materials/Mailing	752	25
10-21-15	Connolly Printing	16 Gill St. Woburn, MA 01801	Print/Materials/Mailing	310	78
9-16-15	Dr. Don's Buttons	3906 W. Morrow Dr Glendale AZ 85308	Lapel Stickers	50	86
5-1-16	Online Candidate	P.O. Box 402 Montgomery NY 12539	Web site	120	00
9-11-15	Staples	111 Middlesex St Burlington MA 01803	Print Materials	94	56
10-21-15	USPS	776 Main St Waltham MA 02451	Postage Stamps	105	00
9-29-15	USPS	776 Main St Waltham MA 02451	Postage Stamps	70	00
10-5-15	USPS	776 Main St Waltham MA 02451	Postage Stamps	105	00
Line 12: Expenditures over \$50				3677	62
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				3677	62

Enter on page 1, line 4

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Committee to Elect Liz A. Tammi page 4

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
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				

Enter on page 1, line 6

* 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
Line 18: OUTSTANDING LIABILITIES (ALL)				

Enter on page 1, line 7





Commonwealth
of Massachusetts

Form CPF R 1: Itemization of Reimbursements Office of Campaign and Political Finance

Office of Campaign and Political Finance
One Ashburton Place, Room 411
Boston, MA 02108
(617) 979-8300

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

Date of Reimbursement:		10-23-15
Name of Individual Being Reimbursed:	Elizabeth Alderman	
Committee Name:	Committee to Elect Liz Alderman	
CPF ID Number (if applicable):		Telephone Number (optional):

ITEMIZE EXPENDITURES IN EXCESS OF \$50

Date Paid	Vendor Name	Vendor Address	Purpose of Expenditure	Amount
5-1-15	Online Candidate	PO Box 402 Montgomery NY 12549	Website	120.00
7-11-15	Staples	111 Middlesex Tpke. Burlington MA 01803	Print Materials	94.56
9-16-15	Dr. Don's Buttons	3906 West. Morrow Dr. Glendale AZ 85308	Label Stickers	50.86
10-5-15	USPS	776 Main St. Waltham, MA 02451	Postage Stamps	105.00
10-21-15	USPS	776 Main St. Waltham, MA 02451	Postage Stamps	105.00

(Include items listed on Page 2) →

Line 1: Expenditures in excess of \$50 (itemized above):	786.20
Line 2: Expenditures \$50 or under (not itemized):	
Line 3: TOTAL AMOUNT REIMBURSED:	786.20

Signed under the penalties of perjury:

Susan B. Leonard, Treasurer
Signature of Candidate / Treasurer

Date: 10-26-2015

Please prepare a separate report for each reimbursement check issued by the committee.

Committee to Elect Liz Alderman page 6

ITEMIZE EXPENDITURES IN EXCESS OF \$50

Date Paid	Vendor Name	Vendor Address	Purpose of Expenditure	Amount
10-24-15	Connolly Printing	16 Gill St. Woburn, MA 01801	Print materials/mailing	310.78
Page 2 Total (add to Line 1 on Page 1):				