

CITY OF WALTHAM aign Finance Report CITY CLERK'S OFFICE

Form Political Finance

2015 FEB 26 P 1:07

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| | Form CPF M 102: Campa Municipal |
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| Commonwalds of Matrachesetts | Office of Campaign and P |
| File with: City or Town Clerk or Election Commis | sion |

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| with: y or Town Clerk or Election Commission Please print or type all info | ormation, except signatures. |
| Fill in dates: Reporting Period Beginning Jan 1 201 | |
| Type of report: (Check one) ☐8th day preceding preliminary ☐8th day preceding election | on 30 day after election Wyear-end report dissolution |
| Susan R Burstein Full Name of Candidate (if applicable) | Committee to Elect Sus an Burstein Committee Name |
| Office Sought and District 36 Riversi de Dr Waldham Residential Address 617-571-1241 | Name of Committee Treasurer 138 Warren St Wa 14ham Committee Mailing Address |
| Tel. No. (optional) | Tel. No. (optional) |
| Line 1: Ending balance from prevalue 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this per Line 5: Ending balance (line 3 minus Line 6: Total in-kind contributions to Line 7: Total (all) outstanding liabil Line 8: Name of bank(s) used | (page 2, line 11) \$ \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(|
| Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, finance activity, including all contributions, loans, receipts, expenditures, disbut campaign finance activity of all persons acting under the authority or on behalf of Signed under the persons acting under the authority or on behalf of Signed under the persons acting under the authority or on behalf of Signed under the persons acting under the authority or on behalf of Signed under the persons acting under the authority or on behalf of Signed under the persons acting under the authority or on behalf of Signed under the persons acting under the authority or on behalf of Signed under the persons acting under the authority or on behalf of Signed under the persons acting under the authority or on behalf of Signed under the persons acting under the authority or on behalf of Signed under the persons acting under the persons acting under the persons acting under the authority or on behalf of Signed under the persons acting under the persons acti | |
| FOR CANDIDATE FILINGS | ONLY: (CANDIDATE MUST SIGN BELOW) |
| finance activity, of all persons acting under the authority or on behalf of this c contributions, incurred any liabilities nor made any expenditures on my behalf. Candidate without Committee OR Candidate with independent activity 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 committee in accordance with the requirements of M.G.L. c. 55. I have not received any during this reporting period. |

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| 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 campaig |
| 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 an |
| 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 campaig |
| 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: |
| O o O Kin to |
| |

Candidate signature (in ink)

Date

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

| Date Received | | Name and Residential Address (alphabetical listing required) | | | | | | | Amount | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
|------------------|----------------------------------------|--------------------------------------------------------------|----------------|-------------|---------------|---------------|---------------|-----------|--------|--------------|----------|---------------------------------------|---------------|----------------------------------------|--------------------|-------------|--------------|---------------------------------------|
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| Line 9: T | otal rec | eipts in | excess | of \$50 | 0 (or | listed | ahov | e) | | | | - | | | | | | |
| Line 10: T | otal rec | eipts \$5 | 0 and t | ınder* | (not | listed | abov | e) | · | | _ | | | ٠ | | | | |
| Line 11: T | OTAL | RECE | IPTS I | N TH | E PI | ERIO | ח | · · | | | | Ente | | 4.5 | | | | |

^{*} 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) | Address | Purpose of Expenditure | Amoui | | |
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| | | | 2: Expenditures over \$50 | | | |
| F | nter on page 1, line 4 | Line 13 | Expenditures \$50 and under* 4: TOTAL EXPENDITURES | 49 | 95 | |

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized 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 From Whom Received* Received | | Residential Address | Description of Contribution | Value | |
|-----------------------------------|-------------------------|---------------------|--------------------------------|-------|--|
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| | | Line 15: | In-kind over \$50 | | |
| | | Line 16: | 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 |
|------------------|-------------------------|----------------------------|-------------------|---------|
| 10/2003 | Susan Burstein | 36 Riverside Dr Waltham | Loan | 3912.40 |
| 10/2007 | Susan Burstein | 36Riverside Dr | Loan | 4556.00 |
| | | | | |
| | | | | |
| | | | | |
| | Enter on page 1, line 7 | Line 18: OUTSTANDING | LIABILITIES (ALL) | 8468.40 |