

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report FILE COPY

Municipal Form OF WALTHAM

Office of Campaign and Political Finance S OFFICE

2015 JAN 20 A IC: 37

(Candidate's signature)

File with: City or Town Clerk or Election Commission Ending Date: December 31, 2014 Fill in Reporting Period dates: January 1, 2014 Beginning Date: Type of Report: (Check one) dissolution x year-end report 8th day preceding election 30 day after election 8th day preceding preliminary Committee to Elect Diane LeBlanc Diane Patricia LeBlanc Committee Name Candidate Full Name (if applicable) Councilor At Large - CITY OF WALTHAM Patricia Ryan Nickelson Office Sought and District Name of Committee Treasurer 55 Berkley Street, Waltham, MA 02451 55 Berkley Street, Waltham, MA 02451 Committee Mailing Address Residential Address (781) 526-1285 Telephone Number (optional): (781) 526-1285 Telephone Number (optional): SUMMARY BALANCE INFORMATION: 852.7 Line 1: Ending Balance from previous report 0 Line 2: Total receipts this period (page 3, line 11) 852.7 Line 3: Subtotal (line 1 plus line 2) 0 **Line 4:** Total expenditures this period (page 5, line 14) 852.7 **Line 5:** Ending Balance (line 3 minus line 4) 0 **Line 6:** Total in-kind contributions this period (page 6) 0 **Line 7:** Total (all) outstanding liabilities (page 7) 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. Date: Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: 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. 201

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.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

1 _	nclude your committee name and a p Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer
			(Constitutions of \$200 of more)
	-		
e 9: Total Receipts over \$5	60 (or listed above)	0	
	d under* (not listed above)	0	
11: TOTAL RECEIPTS		0 6	
ou have itemized receipts of	550 and under, include them in line 0. I	0 +	Enter on page 1, line 2 include only those receipts not itemized above

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	·			
	Line 12: Expenditures over \$50 (or listed above)			0
Line 13: Expenditures \$50 and under* (not listed above)			0	
Enter on page 1, line 4 Line 14: TOTAL EXPENDITURES IN THE PERIOD f you have itemized expenditures of \$50 and under include them in line 12. Line 13 should include only those expenditures of				

^{*} 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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	Line 15: In-Kind Contributions over \$50 (or listed above)			0
Line 16: In-Kind Contributions \$50 & under (not listed above)			0	
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				0

* 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.

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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
			Political	
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				