of Massachusetts

FILE COPY CPF M 102: Campaign Finance Report

Municipal Form CITY OF WALTHAM Office of Campaign and Political Finance

2015 NOT -2 A 10 115

V. 1.120000011100000	File with: City or Town Clerk or Election Commission			
Fill in Reporting Period dates: Beginning Date:	Ending Date: 196/16/2015			
Type of Report: (Check one)				
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution			
David M. Mataxabas	Mataxabas for school committee			
Candidate Full Name (if applicable)	Committee Name			
School committee	Maria Matayabas			
Office Sought and District	Name of Committee Treasurer			
25 Summer St. #5 02452	25 SUMMER ST. #5 02452			
Residential Address	Committee Mailing Address			
	Telephone Number (optional):			
Telephone Number (optional):	Telephone Number (optional).			
SUMMARY BALAN	NCE INFORMATION:			
Line 1: Ending Balance from previous report	0.00			
Line 2: Total receipts this period (page 3, line 1	11) [42.10]			
Line 3: Subtotal (line 1 plus line 2)	142-10			
Line 4: Total expenditures this period (page 5,	line 14) 142-10			
Line 5: Ending Balance (line 3 minus line 4)	0			
Line 6: Total in-kind contributions this period ((page 6)			
Line 7: Total (all) outstanding liabilities (page	7) 0			
Line 8: Name of bank(s) used: Water to	WN savings Pank			
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: Manager the	(Treasurer's signature) Date: 10/3//5			
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1	l 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 activity, of all persons acting under the authority or on behalf of this committee in incurred any liabilities nor made any expenditures on my behalf during this report	the best of my knowledge and belief, a true and complete statement of all campaign finance in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ting 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:	(Candidate's signature) Date: 10/29/15			

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.)

Name and Residential Address Date Received (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)	
			-
······································			
Line 9 Total Recei	pts over \$50 (or listed above)		
Line 10: Total Recei	pts \$50 and under* (not listed above)		
Line 11: TOTAL R	ECEIPTS IN THE PERIOD		← 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.

SCHEDULE A: RECEIPTS (continued)

Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)
9/21	David Mataxabas 25 summer st. 02452	142.10	
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
Line 11: TOTAL R	RECEIPTS IN THE PERIOD		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.

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.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

report all expenditures. Please include your committee name and a page number on each page.)

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	
9/21	staples	Lexington St. Waltham	Flyers + mailing supplies	64-84	
9/21	vista Print	online	Business cards	77-26	
,					
Line 12: Total Expenditures over \$50 (or listed above)					
Line 13: Total Expenditures \$50 and under* (not listed above)					
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD 142-16 * If you have itemized expenditures of \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized					

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

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SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
		Property of the second		
				-
	·			
	Line 12: Expenditures over \$50 (or listed above)			
	Line 13: Expenditures \$50 and under* (not listed above)			
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD Line 14: TOTAL EXPENDITURES IN THE PERIOD				

^{*} 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)				
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

^{*} 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
				سال و المال المال و
	Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)			