

Candidate signature (in ink)

Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

CITY OF WALTHAM CITY CLERK'S OFFICE

2015 JAN 16 A 9:37

SCOMMEN

e with:	ALCUMITI
y or Town Clerk or Election Commission Please print or type all infor	rmation, except signatures.
Fill in dates: Month Date Year Reporting Period Beginning / / Zo/	Month Date Year
Type of report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	n □30 day after election □year-end report □dissolution
Full Name of Candidate (if applicable) Office Sought and District 19 M4d. Sov End WAIHAM Residential Address 781-891-730 4 Tel. No. (optional)	Committee Name PACCION RICA Name of Committee Treasurer A Beal Rd Walthan Committee Mailing Address Tel. No. (optional)
SUMMARY BALANG Line 1: Ending balance from previous Line 2: Total receipts this period (go Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this per Line 5: Ending balance (line 3 minus line 5: Total in-kind contributions the Line 7: Total (all) outstanding liabilite Line 8: Name of bank(s) used	riod (page 3, line 14) s 22,467.57 riod (page 4) s 22,467.57
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to finance activity, including all contributions, loans, receipts, expenditures, disburse campaign finance activity of all persons acting under the authority or on behalf of Signed under the pena Treasurer's signature (in ink)	the best of my knowledge and belief, a true and complete statement of all campaignents, in-kind contributions and liabilities for this reporting period and represents the this committee in accordance with the requirements of M.G.L. c. 55. Itles of perjury:
FOR CANDIDATE FILINGS O	NLY: (CANDIDATE MUST SIGN BELOW)
finance activity, of all persons acting under the authority or on behalf of this con contributions, incurred any liabilities nor made any expenditures on my behalf du Candidate without Committee OR Candidate with independent activity for the large 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 mittee in accordance with the requirements of M.G.L. c. 55. I have not received any ring this reporting period. Uling separate report the best of my knowledge and belief, a true and complete statement of all campaign tents, in-kind contributions and liabilities for this reporting period and represents the 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 tumize 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. Name and Residential Address Occupation & Employer Amount Date (for contributions of \$200 or more) (alphabetical listing required) Received Line 9: Total receipts in excess of \$50 (or listed above) Line 10: Total receipts \$50 and under* (not listed above) Line 11: TOTAL 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.

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

number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amo	unt
7-29-14	PAN MASS Challenge ST. Dules	Doston MA	Ponation	6	\c)\c
9/22/11	ST. Dules	Boston MA	Donation Dinna DANCE	130.	٥٥
•					
			,		·
	·				
- 1					
					<u> </u>
					•
··········					
					. — …
		ļ	Expenditures over \$50	230	ಎ
			Expenditures \$50 and under*	45	-
	Enter on page 1, line 4		TOTAL EXPENDITURES 12 Line 13 should include only		00

^{*}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 Received	From Whom Received*	Residential Address	Description of Contribution	Value
		,		
		12/1		
	v			
	·	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
				:
		$\lfloor m// \rfloor$	γ	
		11//	/	
			, the Tip Beautiful Control of the C	
_ ·	Enter on page 1, line 7	Line 18: OUTSTANDING I	LIABILITIES (ALL)	

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

Page 4