

Form CPF M 102: Campaign Finance Report ERK'S OFFICE Municipal Form

	Office of Campa	CIPAL FOR dgn and Politics		2015 JAN 20 A	§։ ԱԱ	
renerez wealth Massachusetts				RECORDE	<u></u>	
le with: ty or Town Clerk or Election Commission Please print or type all information, except signatures.						
Fill in dates: Reporting Period Beginning Fanuary	Date	2014	_Ending _	Month Date December 31	7== 2014	
Type of report: (Check one) ☐8th day preceding preliminary ☐8th da	y preceding elec	ction 🗆 30	day after e	election Dyear-end repo	ort []dissolution	
	ble)		Matth Name 29 Ch		icK_	
Line 1: Ending balan Line 2: Total receipts Line 3: Subtotal (line 1 Line 4: Total expendi Line 5: Ending balan Line 6: Total in-kind c Line 7: Total (all) outs Line 8: Name of bank	s this period plus line 2) itures this period (line 3 minus) ontributions tanding liab	evious red (page 2, li period (page line 4) s this period (page line 4)	eport ne 11) ge 3, line od (page 4)	\$ 4868.4 \$ 500.0 \$ 5428.4 \$ 336.2 \$ 5092.	0 12 13 17	
Affidavit of Committee Treasurer: I certify that I have examined this report including attact finance activity, including all contributions, loans, receip campaign finance activity of all persons acting under the Treasurer's signature (in ink)	is, expenditures, dist authority or on beha Signed under the	pursements, in-ki If of this commit penalties of per	nd contribution tee in accorda jury:	ns and habilities for this reporting ince with the requirements of M.G. Date	bettog sing tebteseurs rue	
FOR CANDIDA Affidavit of Candidate: (check 1 box only)	TE FILINGS	S ONLY:	CANDIDAT	E MUST SIGN BELOW)		
☐ Candidate with Committee and no activity indeper I certify that I have examined this report including attact finance activity, of all persons acting under the authority contributions, incurred any liabilities nor made any experimental of Candidate without Committee OR Candidate with I certify that I have examined this report including attactions activity, including contributions, loans, receipts the properties of the persons activity of all nersons activity and the committee of the committee	hed schedules and it y or on behalf of this nditures on my behal h Independent activ hed schedules and it	is, to the best of s committee in a If during this rep rity filing separa- is, to the best of irsements, in-kin alf of this commi	ecordance with orting period, ite report my knowledged d contribution ittee in accord	te and belief, a true and complete and liabilities for this reporting	statement of all campaign	

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 Humize 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

Date Received	ach page. Name and Residential Address (alphabetical listing required)		unt	Occupation & Employer (for contributions of \$200 or more)
1/26/14	Mary M. Pavone 1794 Leanington Lone, Naples, FL 34109	100,	w	_
126/14	Paul & tracy Pavone 33 Amberst Ave, Waltham, MA 02451	100.	00	
	MA 02451			
				` `
			<u> </u>	-
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<u> </u>			 	
Line 9:	Total receipts in excess of \$50 (or listed above)	200.	00	
	Total receipts \$50 and under* (not listed above)	360.	00	
Line 11.	TOTAL RECEIPTS IN THE PERIOD	560.	00	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 Page 2 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.

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	(alphabetical listing)	Address	Purpose of Expenditure	Amo	unt
1/20/14	Shoppers Cafe	731 Moody Street Waltham MA	Reception after Square Declication	336.	25
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	·				
			•		
				· · ·	_
				-	-
		Line 12:	Expenditures over \$50	334.	25
			Expenditures \$50 and under*	0	5
	Enter on page 1, line 4	Line 14:	TOTAL EXPENDITURES	336,	24

^{*}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
	,			
				<u> </u>
		,		<u> </u>
		<u> </u>		
	<u> </u>	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
6/21/04	Robert T. Waddit	129 Church St. - Ualtham, MA	Printing, Copying postage - Staples xus. Post office	131.87
10/27/09	Robert T. Waddick	129 church St.	Postage - US Post office	220.00
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	351.87