# FILE COPY



## Form CPF M 102: Campaign Finance Report

Municipal Form

2015 907 29 // 8:38

4030s	Office of C	Campaign and Po	Motern Linence			
onumourrenith (Massachusetts					hEi	CORDED
ile with: City or Town Clerk or Election Commission F	Please print or type	all informati	on, except sig	natures.		
Fill in dates: Month		······································				
Reporting Period Beginning (1)	Dele Ol	2015	Ending	Month O	Date 16	2015
Type of report: (Check one)  ☐8th day preceding preliminary	8th day preceding	g election [	30 day after	election	□year-end rep	oort []dissolution
( Bobert J Wald	lick		The ho	Daic	K Commi	ttee
Full Name of Candidate (if	applicable)	-		Committ	ee Name	,
Councillat Was	l (0	_	179	chur	ch stree	<u>t                                      </u>
Office Sought and Dis	trict	_	Name	of Comm	ittee Treasurer	
129 Church	Street	_	Mat	then	I, Wood	dick
Residential Addres			Com	mittee M:	ailing Address	
	Tel. No. (options	in ] [	<u> </u>		Tel. N	No. (optional)
Line 3: Subtotal Line 4: Total exp Line 5: Ending l Line 6: Total in-k Line 7: Total (all) Line 8: Name of	penditures the salance (line 3 ind contribute) outstanding	nis period minus line 4) ions this p liabilities	eriod (page (page 4)	14) 5  4) 5	5742,1 52,000-0 53742,1 5 35/07 Bank	<u>v</u> 7
Affidavit of Committee Treasurer: I certify that I have examined this report including finance activity, including all contributions, loss campaign finance activity of all persons acting to the committee of the	ns, receipts, expenditure under the authority or or	es, disbursements, a behalf of this co or the penalties of	in-kind contributi mmittee in accord perjury:	ons and liat	ilities for this reportion requirements of M. Date	ng period and represents the
Affidavit of Candidate: (check 1 box only)  Candidate with Committee and no activit I certify that I have examined this report including finance activity, of all persons acting under the contributions, incurred any liabilities nor made  Candidate without Committee OR Candi I certify that I have examined this report including finance activity, including contributions, loans	y independent of the e ling attached schedules authority or on behalf any expenditures on my date with independent line attached schedules	committee and it is, to the be of this committee y behalf during thi t activity filing se and it is, to the be	st of my knowled in accordance wit a reporting period parate report	ge and belie th the requir	of, a true and completements of M.G.L. c.	<ol> <li>I have not received any te statement of all campaign</li> </ol>

Candidate signature (in ink)

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:

#### 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.

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.

Date Received	Name and Residential Address	Amount		Occupation & Employer (for contributions of \$200 or more)
	Carnenters acel 175	150.	حى	
6   12   15 3   14   15	Laborers District Council 7 Laborers Way 1400 Ciston MA 01748	500.	מני	·
		•		
	·			
Line 9:	Total receipts in excess of \$50 (or listed above)	650.	00	
	Total receipts \$50 and under* (not listed above)	_	_	
Line 11:	TOTAL RECEIPTS IN THE PERIOD	650	-	Enter on page 1, line 2

<sup>•</sup> 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
10/14/15	berard Kelleher	42 long fellow Rd. Norwood MA 02062	Campaign literature and mailing	2,000.	w
٠					
					,
	·				
	•				
			,		
				_	
3	· · · · · · · · · · · · · · · · · · ·				
			Expenditures over \$50	2000.	00
	Enter on page 1, line 4	<u>,</u>	Expenditures \$50 and under* :TOTAL EXPENDITURES	2,000	00

<sup>\*</sup>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
· ·				
•				
				<del> </del>
				•
		Line 15: 1	In-kind over \$50	
		Line 16: In-kind \$50 and under		
	Enter on page 1, line 6	Line 17: Total In-kind		

<sup>\*</sup> 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
10/21/09	Robert J: Waddick	. 129 Church St. 114 (tham, MA	Printing, copying postage - Staplese Us. Post Office	131,87
10/27/09	Robert J. Waddick	129 Church Street Waltham, MA	Postage - U.S. Post office	220.00
			•	
· ·	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	351-87