

Form CPF M 102: Campaign Finance Report to Municipal Form

Office of Campaign and Political Finance

18 JAN 23 PM 3: 14

Commonwealth of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 10:2	
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election 30	0 day after election year-end report dissolution
Stephen - 1861-00 Candidate Full Name (if applicable)	Davilya Committee Narge on
- Theol Commy Hee of 1888	
Office Sought and District 160 Windhoop Dienve	60 Winthros he Hover my
Residential Address E-mail: Frequency (©) Gol. Com E-n	nail: Sepandentitee Mailing Address
	one # (optional): 751 JP9 J846
SUMMARY BALANCE IN	NFORMATION:
Line 1: Ending Balance from previous report	571 2.97
Line 2: Total receipts this period (page 3, line 11)	600.00
Line 3: Subtotal (line 1 plus line 2)	6463 93
Line 4: Total expenditures this period (page 5, line 14)	3535.79
Line 5: Ending Balance (line 3 minus line 4)	29 28 14
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: Cost Sorte	on Louis Conk
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my activity, including all contributions, loans, receipts expenditures, disbursements, in-kind contributions activity of all persons acting under the authority of on behalf of this committee in accordance activity of the penalties of perjury:	outions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only	n
Candidate with Committee and no activity independent of the committee Locatify that I have examined this report including attached schedules and it is, to the best of activity, of all persons acting under the authority or on behalf of this committee in accordar incurred any liabilities nor made any expenditures on my behalf during this reporting perior	d.
Candidate without Committee OR Candidate with independent activity filing separate I certify that I have examined this report including attached schedules and it is, to the best of finance activity, including contributions, loans, receipts, expenditures, disbursements, in-ki campaign finance activity of all persons acting under the authority or on behalf of this committee of the committee of th	of my knowledge and belief, a true and complete statement of all campaign ind contributions and liabilities for this reporting period and represents the mittee in accordance with the requirements of M.G.L. c. 55.
	(Condidate's signature) Date: //20/16

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.)

port all receipts. Please include your committee name and a page number on each page.) Name and Residential Address Occupation & Employer					
Name and Residential Address		Amount	(for contributions of \$200 or more)		
Date Received	(alphabetical listing required)				
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1/14/1	Stone how 124 0212				
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Line 9: Total Rece	ipts over \$50 (or listed above)	25000			
		400,00	1		
Line 10: Total Reco	eipts \$50 and under* (not listed above)		<u> </u>		
	RECEIPTS IN THE PERIOD	650.00	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 above.

SCHEDULE A: RECEIPTS (continued)

	Name and Residential Address	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	
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		<u> </u>	
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ļ			
Line 9: Total Rec	eipts over \$50 (or listed above)	200.00	
	ceipts \$50 and under* (not listed above)	400	
		680.00	← 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 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 expend	litures. Please include your comm	ittee name and a page number on	each page.)	
	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Paid	(aiphabetical fisting)	H Over WOY		100.00
12/2/2	Holiday Form, hear	6 evae nA 0451	Bonefleri	
2011	Gaver	6 Dae 44 0HV		
	(4) olewort	Browway Revene MA 02150	Adverticing	200.00
	Nows poper	Revene MA 0450	NO CONTRACTOR	
	Modeson	Nenic	promis	3205.79
		160 food every 1	/	
	[[
				<u> </u>
	<u> </u>			
		Line 12: Total Expenditures	over \$50 (or listed above)	7535.79
		Line 13: Total Expenditures \$	50 and under* (not listed above)	
	Enter on nage 1 line 4 -	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	3535-7
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD 3535-79				

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 above.

SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid		Purpose of Expenditure	Amount
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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				<u> </u>
			<u> </u>	.
<u> </u>				
<u> </u>				
<u> </u>	<u> </u>	Line 12: Expenditures over	\$50 (or listed above)	3535.79
		Line 13: Expenditures \$50 a		
				35257
	Enter on page 1, line 4 -	Line 14: TOTAL EXPENI	3 should include only those expend	

^{*} 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 5

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 6 on page 1.

Date Received	From Whom Received*	Residential Address D	Description of Contribution	Value
Date Received				
		-		
	·			
				i
		Line 15: In-Kind Contributions		
		Line 16: In-Kind Contributions		
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	O and address

^{*} 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.

ate Incurred	To Whom Due	Address	Purpose	Amount
				
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				-
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		→ Line 18: TOTAL OUTSTA		()