

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	N 1,17 Ending Date: OCt 20,17
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Candidate Full Name (if applicable) WAND 3 City Council Office Sought and District	Committee Name Committee Name Cerald Deline Name of Committee Treasurer
6/ Memokind Dk Wuhyokc Residential Address	4/ Menocial Dx Hon/or Committee Mailing Address
Telephone Number (optional): 4/3-322-9844	Telephone Number (optional):
SUMMARY BALANC	E INFORMATION: $\exists_{\Omega} \; \boldsymbol{\Xi} \; \boldsymbol{\Xi}$
Line 1: Ending Balance from previous report	\$4.00 PT 8 00
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, line	e 14)
Line 5: Ending Balance (line 3 minus line 4)	\$ 4.00
Line 6: Total in-kind contributions this period (page	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: Layeke	Redit UNION
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursement, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	ontributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 9-/6-/7
Candidate with Committee Candidate with Committee Candidate with Committee Candidate with Committee	best of my knowledge and belief, a true and complete statement of all campaign finance ordance with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this Signed under the penalties of periors:	in-kind contributions and liabilities for this reporting period and represents the

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.)

eport all receipts. Please include your committee name and a page number on each page.) Name and Residential Address			Occupation & Employer		
Date Received (alphabetical listing required)		Amount	(for contributions of \$200 or more)		
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ine 9: Total Rece	ipts over \$50 (or listed above)				
ine 10: Total Rec	eipts \$50 and under* (not listed above)	0			
ine 11: TOTAL	RECEIPTS IN THE PERIOD	\cap	☐ Enter on page 1, line 2		
			ald include only those receipts not itemized above.		

^{*} 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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		Line 12: Total Expenditure	es over \$50 (or listed above)	0
		Y' 10 T 1T 1'	- 650 and and ank (not 1:)	A
		Line 13: Total Expenditure	s \$50 and under* (not listed above)	
	•	Line 14: TOTAL EXPEN	NUMBER OF THE PERIOD	\sim

^{*} 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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
contributes more that	bution is received from a person who 1 \$50 in a calendar year, you must report	Line 15: In-Kind Contribution	ns over \$50 (or listed above)	0
	s of the contributor; in addition, if the or more, you must also report the ion and employer.	Line 16: In-Kind Contribution	s \$50 & under (not listed above)	0
•	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND	CONTRIBUTIONS	0

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.

To Whom Due	Address	Purpose	Amount
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			12
		To Whom Due Address	To Whom Due Address Purpose Description: Description: