

# Form CPF M 102: Campaign Finance Report Municipal Political Finance Jan - 7 Alf Bir Es **Municipal Form**

Fill in Penarting Pariod datas	File with City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: On ye	WZO19 Ending Date: 17 31 DECTO19
Type of Report: (Check one)	710
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Loud Oliveira	
Candidate Full Name (if applicable)	
	Committee Name
School Committee	
Office Sought and District	Name of Committee Treasurer
345 Brownell Ave	
Residential Address	Committee Mailing Address
Telephone Number (optional): 508 264 805 6	
Telephone (vulnuel (optional): 308 204 103 G	Telephone Number (optional):
SUMMADY DAT ANGE	Thursday myon
SUMMARY BALANCE	INFORMATION:
Line 1: Ending Balance from previous report	_ 0 _
Line 2: Total receipts this period (page 3, line 11)	- 0-
V. 3.01100	
Line 3: Subtotal (line 1 plus line 2)	-0-
Line 4: Total aypanditures this movied (ages 5.2)	
Line 4: Total expenditures this period (page 5, line	14)
Line 5: Ending Balance (line 3 minus line 4)	<u> </u>
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:	
tano or ount(s) asea.	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind continuous activity of all persons acting under the authority or on behalf of this committee in accordance.	
Signed under the penalties of perjury:	(Treasurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box or	aly)
Candidate with Committee and no activity independent of the committee  I certify that I have examined this report including attached schedules and it is, to the bes activity, of all persons acting under the authority or on behalf of this committee in according incurred any liabilities nor made any expenditures on my behalf during this reporting per	t of my knowledge and belief, a true and complete statement of all campaign finance ance with the requirements of M.G.L. c. 55. I have not received any contributions, iod.
Candidate without Committee OR Candidate with independent activity filing separate certify that I have examined this report including attached schedules and it is, to the best finance activity, including contributions, leans, receipts, expenditures, disbursements, incampaign finance activity of all persons cting under the authority or on behalf of this contributions.	t of my knowledge and belief, a true and complete statement of all campaign
signed under the penalties of perjury	(Candidate's signature) Date: 1/7/2020
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#### 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.)

Name and Residential Address			Occupation & Employer		
Date Received	(alphabetical listing required) Amount		(for contributions of \$200 or more)		
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ne 9: Total Receipt	s over \$50 (or listed above)				
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ne 10: Total Receip	ts \$50 and under* (not listed above)				
A 11. TOTAL DE	CEIPTS IN THE PERIOD		← 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.

# SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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ine 9: Total Receip	ts over \$50 (or listed above)		
ine 10: Total Receip	pts \$50 and under* (not listed above)		
ine 11: TOTAL P	ECEIPTS IN THE PERIOD		
		L	← Enter on page 1, line 2 d include only those receipts not itemized above

<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.

## 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	(alphabetical listing)	Address	Purpose of Expenditure	Amoun
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		Line 12: Total Expenditures ov	er \$50 (or listed above)	
Part				
		Line 13: Total Expenditures \$50 and under* (not listed above)		
	Enter on page 1 line 4 →	Line 14: TOTAL EXPENDIT	HRES IN THE PERIOD	

<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.

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## SCHEDULE B: EXPENDITURES (continued)

To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and	under* (not listed above)	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				
		include them in line 12. Line 13 s		<u> </u>

<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.

#### 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
	1			
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	

<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.

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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.

Date Incurred	To Whom Due	Address	Purpose	Amount
	П			
<u> </u>	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANE	DING LIABILITIES (ALL)	