

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ELECTION DEPT. SOMERVILLE, MA

O. F. Landauditagority	File with: Childre with dlerk of Election Edmmission
Fill in Reporting Period dates: Beginning Date: 1/1	/2018 Ending Date: 12/31/2018
Type of Report: (Check one)	
☐ 8th day preceding preliminary ☐ 8th day preceding election.	30 day after election year-end report dissolution
Lee Erica Palmer Candidate Full Name (if applicable)	Committee to Elect Lee Palmer Committee Name
School Committee - Ward 3, Somerville	Karen Gardner
Office Sought and District	Name of Committee Treasurer
17 Pitman Street, Somerville, MA 02143	17 Pitman Street, Somerville, MA 02143
B-mail: leevicapalmeregmail.com	E-mail: Karen gardner Egmail. Com
Phone # (optional): 7813301740	Phone # (optional): 6175133296
SUMMARY BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	\$4,166.87
Line 2: Total receipts this period (page 3, line 1	1) 25.00
Line 3: Subtotal (line 1 plus line 2)	4191.87
Line 4: Total expenditures this period (page 5, 1	ine 14) 460.59
Line 5: Ending Balance (line 3 minus line 4)	3731,28
Line 6: Total in-kind contributions this period (page 6) 0
Line 7: Total (all) outstanding liabilities (page 7	7) 30.00
Line 8: Name of bank(s) used: East Cambridge S	Savings Bank
activity, including all contributions, loans, receipts, expenditures, disbursements, in-kir finance activity of all persons acting under the authority or on behalf of this committee	pest of my knowledge and belief, a true and complete statement of all campaign finance and contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1	box only)
Candidate with Committee and no activity independent of the committee I I certify that I have examined this report including attached schedules and it is, to activity, of all persons acting under the authority or on behalf of this committee in incurred any liabilities nor made any expenditures on my behalf during this report	the best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ting period.
finance activity, including contributions, loans, receipts, expenditures, disbursence campaign finance activity of all persons acting under the authority or on behalf of	the best of my knowledge and belief, a true and complete statement of all campaign ents, in-kind contributions and liabilities for this reporting period and represents the this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature)

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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		The state of the s		
The state of the s				
ine 9: Total Recei	pts over \$50 (or listed above)	0		
ine 10: Total Rece	ipts \$50 and under* (not listed above)	25.00		
	RECEIPTS IN THE PERIOD	25.00	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)

Date Received	Name and Residential Address (alphabetical listing required) Amoun		Occupation & Employer (for contributions of \$200 or more)	
		The state of the s		
Line 9: Total Rece	ipts over \$50 (or listed above)	Barrens Barren Barrens Barrens Barrens Barrens Barrens Barrens Barrens Barrens		
Line 10: Total Rece	eipts \$50 and under* (not listed above)	Europain a contractive and a c		
	RECEIPTS IN THE PERIOD		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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/13/18	Friends of Healey	c/o Jake Wilson 110 Belmont Street, #2 Somerville, MA 02143	Healey School Arts Fest donation	75.00
12/9/18	DreamHost	PMB #257, 417 Associated Rd., Brea, CA 92821	Web hosting costs	119.40
er e				AND THE STATE OF T
		Line 12: Total Expenditures or	ver \$50 (or listed above)	194.4
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	266.19
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	460.5

^{*} 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	. ' 1		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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	- I - I - I - I - I - I - I - I - I - I			
		Line 12: Expenditures over \$5	0 (or listed above)	HEMINIA
. *		Line 13: Expenditures \$50 and	under* (not listed above)	Control of the contro
		Zine 13. Expenditures \$50 and	under (not usied above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	

^{*} 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.

	T	D-41-4-1 A 13	Danielia of Cartellati	Volum
Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions	,	Participant and the second sec
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	C

^{*} 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
12/18/18	Somerville High School Yearbook	81 Highland Ave. Somerville, MA 02143	School Committee ad in program booklet	Eggadge d
			(