

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

		Fil	le with: City or Town Cle	rk or Election Commiss		
Fill in Reporting Period dates: Beginning Date:	DEC. 31, 20	Ending Da	nte: DEC. 31.	2018		
Type of Report: (Check one)						
8th day preceding preliminary 8th day preceding election	1	after election	year-end report	dissolution		
CATHERINE BOADONANO	Como	17769 71	ELECT CATHS	A MUS GRAMA		
Candidate Full Name (if applicable)		27,00,0	Committee Name	TO FORDINA		
		0	7			
SCHOOL COMMITTIES WAND 7			BONDONPRO			
Office Sought and District		Name	of Committee Treasurer			
20 WYETH ST. MAYDEN, MA	17 8	MEZY M	D. PS HERONY	M17 01940		
Residential Address			mittee Mailing Address			
Telephone Number (optional):	Telephone	Number (optional):				
		-				
SUMMARY BALAN	NCE INFO	RMATION:				
	. [0.1 00		-		
Line 1: Ending Balance from previous report		24.37				
Line 2. Total receipts this newled (record 2 line)			N	–]		
Line 2: Total receipts this period (page 3, line 1	11)	0		4 5)		
Line 3: Subtotal (line 1 plus line 2)			i i i			
25me of Subtotal (fille I plus fille 2)	[<u> </u>		
Line 4: Total expenditures this period (page 5,	line 14)	0				
	' L					
Line 5: Ending Balance (line 3 minus line 4)		24.37	in the second			
			<u> </u>	= \/		
Line 6: Total in-kind contributions this period ((page 6)	300, 00	<u> </u>			
71 7 m (1/15)) 1 1 1 1 1 1 1 1				7		
Line 7: Total (all) outstanding liabilities (page	7)	0				
Line 8: Name of bank(s) used: CENTUR.	Y BAN	<u>K</u> .	The state of the s			
Affidavit of Committee Treasurer:	· · · · · · · · · · · · ·			11		
I certify that I have examined this report including attached schedules and it is, to the b activity, including all contributions, loans, receipts, expenditures, disbursements, in-kin	nd contributions ar	d liabilities for this rep	porting period and represe	ill campaign finance nts the campaign		
finance activity of all persons acting under the authority or on behalf of this committee	in accordance wit	the requirements of I	M.G.L. e. 55.			
Signed under the penalties of perjury:		(Treasurer's sig	gnature) Date:	2.1.19		
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1	box only)			<u> </u>		
	••					
I certify that I have examined this report including attached schedules and it is, to	the best of my kno	wledge and belief, a tr	rue and complete statemen	t of all campaign financ		
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	accordance with t	ne requirements of M.	G.L. c. 55. I have not rece	ived any contributions,		
	5 1					
Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign						
finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the 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.						
campaign mance activity of an persons acting under the authority of on behalf of	nis committee in	ecordance with the re-	quirements of M.G.L. c. 5	ð. 		
Signed under the penalties of perjury:	·	(Candidate's sig	gnature) Date:	2.1.19		

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		
12.11.18	ItOUDING FAMILIED OF MALDEN	919 EASTERN AUC MACDEN	7045	300.00		
		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 CONTRIBUTIONS					

^{*} 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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