

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Itemize contributors who have made in-kind contributions of *more than \$50*. In-kind contributions of \$50 or less may be itemized and included in line 15, or added together from the committee's records and included in line 16.

Date received	From whom received*	Residential address	Description of contribution	Value	
Line 15: In-kind over \$50 (or listed above)					
Line 16: In-kind \$50 or less (not listed above)					
Line 17: Total in-kind contributions (Enter here and on page 1, line 6)					

*If an in-kind contribution is received from a person (including candidate) who contributes more than \$50 in a calendar year, you must report the name and address, occupation and employer of the contributor.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL outstanding liabilities, including those which have been reported previously as well as those incurred during this reporting period.

Date incurred	To whom due	Address	Purpose	Amount	
Line 18: Total outstanding liabilities (Enter here and on page 1, line 7)					

SCHEDULE E: DONORS OF \$50 AND LESS

Line 19: Total number of donors in this period whose aggregate contributions (including in-kind contributions) equal an amount or value of \$50.00 or less	2
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This page may be copied if additional pages are required to report all activity, Include committee name and a page number on each additional page.



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report
Municipal Form TOWN OF BROOKLINE
Office of Campaign and Political Finance TOWN CLERK

File with:
City or Town Clerk or Election Commission

2016 JUN 2 P 4:14

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning April 22 2016 Ending May 22 2016

Type of report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Neil Wisniewski
Full Name of Candidate (if applicable)
SELCOMAN
Office Sought and District
20 Henry St Brookline
Residential Address
Tel. No. (optional)

Committee for Neil Wisniewski Selection
Committee Name
Neil Gordon
Name of Committee Treasurer
20 Henry St Brookline
Committee Mailing Address
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ 7560.80
Line 2: Total receipts this period (page 2, line 11)	\$ 100.00
Line 3: Subtotal (line 1 plus line 2)	\$ 7660.80
Line 4: Total expenditures this period (page 3, line 14)	\$ 499.53
Line 5: Ending balance (line 3 minus line 4)	\$ 7161.27
Line 6: Total in-kind contributions this period (page 4)	\$ -
Line 7: Total (all) outstanding liabilities (page 4)	\$ -
Line 8: Name of bank(s) used	<u>Brookline Bank</u>

Affidavit of Committee Treasurer:
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 all 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.
Signed under the penalties of perjury:
[Signature] Date 6/2/16
Treasurer's signature (in ink)

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)
 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 best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all 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.
 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.
Signed under the penalties of perjury:
[Signature] Date 6/2/2016
Candidate signature (in ink)

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

* 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.

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
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK
MAY 23 10 02 AM '16

File with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Apr 16, 2016 Ending Date: May 23, 2016

Type of Report: (Check one)

8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Michael A. Burstein
Candidate Full Name (if applicable)

Library Trustee, Townwide
Office Sought and District

50 Garrison Rd. #1, Brookline, MA 02445
Residential Address

Telephone Number (optional): _____

Burstein for Brookline
Committee Name

Nomi S. Burstein
Name of Committee Treasurer

PO Box 1713, Brookline, MA 02446
Committee Mailing Address

Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	148.01
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	148.01
Line 4: Total expenditures this period (page 3, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	148.01
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	680
Line 8: Name of bank(s) used: <u>Brookline Bank</u>	

Affidavit of Committee Treasurer:
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 all 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.

Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: May 23, 2016

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

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 best of my knowledge and belief, a true and complete statement of all 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. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

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.

Signed under the penalties of perjury: Michael A. Burstein (Candidate's signature) Date: May 23, 2016

Burstein for Brookline
page 1



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN OF BROOKLINE
TOWN CLERK

2016 JUN -2 A 11: 02

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Ending Date:

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)

Office Sought and District

Residential Address

Telephone Number (optional):

Committee Name

Name of Committee Treasurer

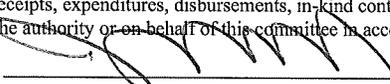
Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<input type="text" value="3,150.90"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value=".05"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="3,150.95"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="3,150.95"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text" value="5,000.00"/>
Line 8: Name of bank(s) used:	<input type="text" value="BROOKLINE BANK, PAYPAL"/>

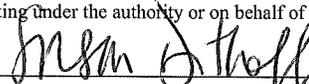
Affidavit of Committee Treasurer:
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind 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.

Signed under the penalties of perjury:  (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 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, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

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.

Signed under the penalties of perjury:  (Candidate's signature) Date:

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
4/20/2008	SUSAN WOLF DITKOFF (LOAN)	145 MASON TERRACE BROOKLINE, MA 02446	LOAN FROM CANDIDATE	2,000.00
4/22/2013	SUSAN WOLF DITKOFF (LOAN)	145 MASON TERRACE BROOKLINE, MA 02446	LOAN FROM CANDIDATE	3,000.00
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	5,000.00



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

RECEIVED
TOWN OF BROOKLINE
TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Ending Date:

2016 FEB -1 A 8:07

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)

Office Sought and District

Residential Address

Telephone Number (optional):

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<input type="text" value="0"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="0"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="0"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="0"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="0"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text" value="0"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text" value="0"/>
Line 8: Name of bank(s) used:	<input type="text" value="N/A"/>

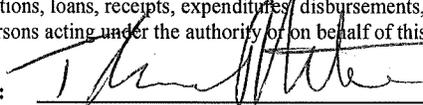
Affidavit of Committee Treasurer:
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind 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.

Signed under the penalties of perjury: _____ (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 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, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

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.

Signed under the penalties of perjury:  (Candidate's signature) Date:



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN OF BROOKLINE
TOWN CLERK

2016 JUN -2 P 4: 14

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
 Reporting Period Beginning April 2016 Ending May 2016

Type of report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

NEIL R. GORDON
 Full Name of Candidate (if applicable)
CONSTABLE
 Office Sought and District
87 107 St Brookline
 Residential Address
 Tel. No. (optional)

Committee Name
 Name of Committee Treasurer
 Committee Mailing Address
 Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$	<u>00</u>
Line 2: Total receipts this period (page 2, line 11)	\$	<u>00</u>
Line 3: Subtotal (line 1 plus line 2)	\$	
Line 4: Total expenditures this period (page 3, line 14)	\$	<u>00</u>
Line 5: Ending balance (line 3 minus line 4)	\$	<u>00</u>
Line 6: Total in-kind contributions this period (page 4)	\$	<u>00</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$	<u>00</u>
Line 8: Name of bank(s) used		<u>N/A</u>

Affidavit of Committee Treasurer:
 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 all 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.
 Signed under the penalties of perjury:
[Signature] Date 6/2/16
 Treasurer's signature (in ink)

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)
 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 best of my knowledge and belief, a true and complete statement of all 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. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.
 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.
 Signed under the penalties of perjury:
[Signature] Date 6/2/16
 Candidate signature (in ink)

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

* 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.

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
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	