



**Form CPF M 102-0: Campaign Finance Report  
Municipal Form**  
Office of Campaign and Political Finance

City or Town of: BROOKLINE

Please print or type all information, except signatures.

Fill in dates:	Month	Day	Year	Ending	Month	Day	Year
Reporting Period Beginning					12	31	2014

Type of Report: (Check One)

8th day preceding preliminary/primary   
  8th day preceding election   
  30th day following election (Town or Special)   
  20th day of January (Year-End Report)

Pursuant to M.G.L., Chapter 55:

- I certify that I am a candidate for or hold Municipal Office.
- I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
- I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/15/15	Carol Troyen Lake	25 Salisbury Rd	Library Trustee
1.15.2015	Patricia Mangolis	49 Harvard Ave	Library Trustee
2/4/15	Karen Livingston	77 Warren St	Library Trustee
2/4/15	Barbara C. Scott	26 Crowninshield Rd	School Committee
2/7/15	David M Pollak	112 LANCASTER TERR	School Committee
2/5/15	Nileen Charlip	523 BOYLSTON ST	SCHOOL COMMITTEE
2/6/15	Carol Axelrod	323 CLARK RD	Library trustees
2/12/15	Barbara Dugan	8 WALNUT ST	Brookline Housing
2/12/15	Dana T. ...	52 LINDEN PL	BROOKLINE HOUSING
2/25/15	Steve ...	117 ...	Brookline







### 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
Line 15: In-kind over \$50				0
Line 16: In-kind \$50 and under				0
Line 17: Total In-kind				0

Enter on page 1, line 6

\* 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
Line 18: OUTSTANDING LIABILITIES (ALL)				0

Enter on page 1, line 7

## 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.*

This page may be copied 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
	Citizen's Bank	Providence, RI	monthly bank charges	
			(12 x \$8)	96.00
Line 12: Expenditures over \$50				96.00
Line 13: Expenditures \$50 and under*				—
Line 14: TOTAL EXPENDITURES				96.00

Enter on page 1, line 4

\*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.





Commonwealth of Massachusetts

# Form CPF M102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/14 Ending Date: 12/31/14

Type of Report: (Check one)

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

EDWARD (SANDY) GROSSI  
Candidate Full Name (if applicable)

Town Moderator  
Office Sought and District

60 Glen Rd. Brookline MA  
Residential Address

Telephone Number (optional): \_\_\_\_\_

N/A  
Committee Name

N/A  
Name of Committee Treasurer

N/A  
Committee Mailing Address

Telephone Number (optional): \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>- 0 -</u>
Line 2: Total receipts this period (page 3, line 11)	<u>- 0 -</u>
Line 3: Subtotal (line 1 plus line 2)	<u>- 0 -</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>- 0 -</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>- 0 -</u>
Line 6: Total in-kind contributions this period (page 6)	<u>- 0 -</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>- 0 -</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: \_\_\_\_\_ (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: [Signature] (Candidate's signature) Date: 1/15/15















# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

11/14

Ending Date:

12/31/14

Type of Report: (Check one)

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

PATRICK J. WARD  
Candidate Full Name (if applicable)

TOWN CLERK  
Office Sought and District

12 EDWIN STREET, BROOKLINE  
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

0

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

0

Line 4: Total expenditures this period (page 5, line 14)

0

Line 5: Ending Balance (line 3 minus line 4)

0

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used:

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: 12/31/14















Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01-01-2014 Ending Date: 12-31-2014

Type of Report: (Check one)

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

Betsy DeWitt  
Candidate Full Name (if applicable)

Brookline Selectman  
Office Sought and District

94 Upland Rd. Brookline, MA 02445  
Residential Address

Telephone Number (optional): \_\_\_\_\_

Betsy DeWitt for Selectman  
Committee Name

\_\_\_\_\_  
Name of Committee Treasurer

\_\_\_\_\_  
Committee Mailing Address

Telephone Number (optional): \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>1,661.34</u>
Line 2: Total receipts this period (page 3, line 11)	<u>- 0 -</u>
Line 3: Subtotal (line 1 plus line 2)	<u>1,661.34</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>15.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>1,646.34</u>
Line 6: Total in-kind contributions this period (page 6)	<u>- 0 -</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>12,886.46</u>
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: 3/31/15

#### 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: Betsy DeWitt (Candidate's signature) Date: 03/31/2015













# *Campaign to Re-elect Betsy DeWitt*

31 March 2014

*Effective March 31, 2014, the Betsy DeWitt for Selectman Committee is officially dissolved. A cashier's check for the balance of \$1,646.34 in the account at Brookline Bank was drawn on March 24, 2014, and the account is closed. See attached statement.*



*Betsy DeWitt*

617-738-5950

betsy@betsydewitt.com

George E. Humphrey, Treasurer

*Betsy DeWitt for Selectman Committee 2012*

Rebecca Stone & Dick Benka, Co-Chairs

# BrooklineBank

P.O. Box 470469, Brookline MA 02447

Date 3/31/14  
Primary Account  
Enclosures

Page 1  
430043588

**COPY**

\*\*\*\*\*AUTO\*\*SCH 5-DIGIT 02445  
2766 0.4670 AV 0.381 10 1 217  
BETSY DEWITT FOR SELECTMAN  
GEORGE E HUMPHREY  
COMMITTEE  
46 GARDNER ROAD  
BROOKLINE MA 02445-4561

GREAT MORTGAGE RATES AND TERMS. Whether you are up-sizing, down-sizing, refinancing, or even a first-time homebuyer, Brookline Bank has the right mortgage for you. Call us today or visit [brooklinebank.com](http://brooklinebank.com) for current rates.

## C H E C K I N G . A C C O U N T S

<b>Business Checking</b>		<b>Number of Checks</b>	<b>0</b>
Account Number	430043588	Statement Dates	3/03/14 thru 3/31/14
Beginning Balance	1,646.34	Days in the statement period	29
Deposits/Credits	.00	Average Balance	1,192.17
1 Checks/Debits	1,646.34		
Maintenance Fee	.00		
Interest Paid	.00		
Ending Balance	.00		

### Activity in Date Order

Date	Description	Amount	
3/24	Closing entry - zero balance	1,646.34-	.00

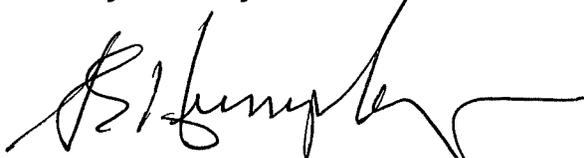
# Campaign to Re-elect Betsy DeWitt

12 April 2015

*Effective March 31, 2014, the Betsy DeWitt for Selectman Committee is officially dissolved. A cashier's check for the balance of \$1,646.34 in the account at Brookline Bank was drawn on March 24, 2014, and the account is closed. See attached statement. There are no outstanding liabilities.*



Betsy DeWitt  
94 Upland Road  
Brookline, MA 02445  
617-738-5950  
betsy@betsydewitt.com



George E. Humphrey, Treasurer  
46 Gardner Road  
Brookline, MA 02445

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TOWN CLERK  
2015 APR 13 10 2 57

*Betsy DeWitt for Selectman Committee 2012*  
Rebecca Stone & Dick Benka, Co-Chairs

# Campaign to Re-elect Betsy DeWitt

12 April 2015

*Effective March 31, 2014, I, Betsy DeWitt, did hereby forgive and cancel all outstanding loans to the Betsy DeWitt for Selectman Committee in the amount of \$11,240.12. The Committee has no other outstanding liabilities.*



*Betsy DeWitt*  
Betsy DeWitt  
94 Upland Road  
Brookline, MA 02445  
617-738-5950  
betsy@betsydewitt.com



*George E. Humphrey, Treasurer*  
George E. Humphrey, Treasurer  
46 Gardner Road  
Brookline, MA 02445

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*Betsy DeWitt for Selectman Committee 2012*  
Rebecca Stone & Dick Benka, Co-Chairs



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01-01-2014 Ending Date: 12/31/2014

Type of Report: (Check one)

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

Betsy DeWitt  
Candidate Full Name (if applicable)  
Selectman  
Office Sought and District  
94 Upland Rd. Brookline, MA 02445  
Residential Address  
Telephone Number (optional): 617-738-5950

Betsy DeWitt for Selectman  
Committee Name  
George E. Humphrey  
Name of Committee Treasurer  
46 Gardner Rd. Brookline MA 02445  
Committee Mailing Address  
Telephone Number (optional):

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>4661.34</u>
Line 2: Total receipts this period (page 3, line 11)	<u>- 0 -</u>
Line 3: Subtotal (line 1 plus line 2)	<u>4661.34</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>4661.34</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>- 0 -</u>
Line 6: Total in-kind contributions this period (page 6)	<u>- 0 -</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>- 0 -</u>
Line 8: Name of bank(s) used:	<u>Brookline Bank</u>

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TOWN CLERK  
2015 APR 13 P 2:55

#### 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: 04/12/2015

#### 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: Betsy DeWitt (Candidate's signature) Date: 04/12/2015



**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	NONE	-0-	
Line 9: Total Receipts over \$50 (or listed above)		-0-	
Line 10: Total Receipts \$50 and under* (not listed above)		-0-	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		-0-	← 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 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
	NONE			
Line 15: In-Kind Contributions over \$50 (or listed above)				
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				0-

\* 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
5/13/06	Betsy DeWitt	94 Upland Rd. Brookline MA	Loan for postage & printing	10,308.29
6/09/09	Betsy DeWitt	94 Upland Rd Brookline MA	Loan for postage & printing	2,578.17
3/31/14	Betsy DeWitt	94 Upland Rd	ALL LOANS Forgiven & Cancelled	-11,240.12

Enter on page 1, line 7 →

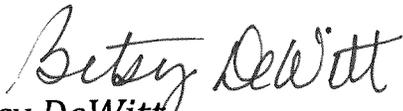
**Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)**

- 0 -

# *Campaign to Re-elect Betsy DeWitt*

12 April 2015

*Effective March 31, 2014, I, Betsy DeWitt, did hereby forgive and cancel all outstanding loans to the Betsy DeWitt for Selectman Committee in the amount of \$11,240.12. The Committee has no other outstanding liabilities.*



*Betsy DeWitt*

94 Upland Road  
Brookline, MA 02445  
617-738-5950  
betsy@betsydewitt.com



*George E. Humphrey, Treasurer*  
46 Gardner Road  
Brookline, MA 02445

2015 APR 13 P 2:57

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TOWN CLERK

*Betsy DeWitt for Selectman Committee 2012*  
Rebecca Stone & Dick Benka, Co-Chairs

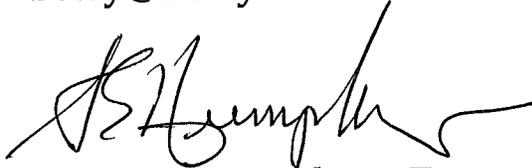
# *Campaign to Re-elect Betsy DeWitt*

12 April 2015

*Effective March 31, 2014, the Betsy DeWitt for Selectman Committee is officially dissolved. A cashier's check for the balance of \$1,646.34 in the account at Brookline Bank was drawn on March 24, 2014, and the account is closed. See attached statement. There are no outstanding liabilities.*



*Betsy DeWitt*  
Betsy DeWitt  
94 Upland Road  
Brookline, MA 02445  
617-738-5950  
betsy@betsydewitt.com



*George E. Humphrey, Treasurer*  
George E. Humphrey, Treasurer  
46 Gardner Road  
Brookline, MA 02445

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TOWN CLERK  
2015 APR 13 P 2:57

*Betsy DeWitt for Selectman Committee 2012*  
Rebecca Stone & Dick Benka, Co-Chairs



# Form SEL102: Brookline Supplemental Campaign Finance Report

To be completed by candidates for the Office of Selectman pursuant to Sec. 3.1.7 of the Town By-Laws

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

Please print or type all information except signatures

Fill in dates: Reporting period beginning June <sup>Month</sup> 4 <sup>Day</sup> 2014 <sup>Year</sup> and ending Dec <sup>Month</sup> 31 <sup>Day</sup> 2014 <sup>Year</sup>

Report period:  
 15<sup>th</sup> day before election   
 8<sup>th</sup> day before election   
 30<sup>th</sup> day after election   
 Year-end report

BENJAMIN J. FRANCIS  
 Full name of candidate  
Selectman  
 Office sought  
275 CYPRESS ST APT 103  
 Residential address  
BROOKLINE, MA 02446  
 Tel. No. (optional)

COMMITTEE TO ELECT BENJAMIN FRANCIS  
 Committee name  
NEIL R. GORDON  
 Name of committee treasurer  
275 CYPRESS ST APT 103  
 Committee mailing address  
BROOKLINE MA 02446  
 Tel. No. (optional)

### SUMMARY BALANCE INFORMATION

Line 1: Ending balance from previous report	\$ <u>4696.17</u>
Line 2: Total receipts this period (from page 2, line 11)	\$ <u>-</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>4696.17</u>
Line 4: Total expenditures this period (from page 3, line 14)	\$ <u>552.50</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>4143.67</u>
Line 6: Total in-kind contributions this period (from page 4)	\$ <u>-</u>
Line 7: Total of all outstanding liabilities (from page 4)	\$ <u>-</u>
Line 8: Name of bank 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 and Brookline By-Laws, sec. 3.1.7.

Signed under the penalties of perjury:  
[Signature] 1/4/15  
 Treasurer's signature (in ink) Date

### FOR CANDIDATE FILINGS ONLY: (Candidate must sign below)

**Affidavit of Candidate: (check one 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 and Brookline By-Law 3.1.7. 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 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 and Brookline By-Laws, sec. 3.1.7.

Signed under the penalties of perjury:  
[Signature] 1/12/15  
 Candidate's signature (in ink) Date





**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)					
<b>Line 17: Total in-kind contributions</b> (Enter here and on page 1, line 6)				<b>NONE</b>	

\*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	
<b>Line 18: Total outstanding liabilities</b> (Enter here and on page 1, line 7)				<b>NONE</b>	

**SCHEDULE E: DONORS OF \$50 AND LESS**

<b>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</b>	<b>NONE</b>
---	-------------

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

Office of Campaign and Political Finance

2015 JAN 13 P 3:29

File with:  
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:  
 Reporting Period Beginning Month JUNE 4 Date 2014 Year Ending Month DEC 31 Date 2014 Year

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

BENJAMIN J. FRANCO  
 Full Name of Candidate (if applicable)  
SELECTMAN - BROOKLINE  
 Office Sought and District  
275 CYPRESS ST APT 103  
 Residential Address  
BROOKLINE MA 02446  
 Tel. No. (optional)

COMMITTEE TO ELECT BENJAMIN FRANCO  
 Committee Name  
NEIL R. GORDON  
 Name of Committee Treasurer  
275 CYPRESS ST APT 103  
 Committee Mailing Address  
BROOKLINE MA 02446  
 Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report	\$ <u>4696.17</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>-</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>4696.17</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>552.50</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>4143.67</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>-</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>-</u>
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] 1/9/15  
 Treasurer's signature (in ink) Date

### 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] 1/12/15  
 Candidate signature (in ink) Date



**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.*

This page may be copied 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	
9/18/14	BROOKLINE CAN	93 WINCHESTER ST BROOKLINE MA 02446	DONATION	65	00
10/13/14	BROOKLINE SISTER CITY PROJECT	PO BOX 114 BROOKLINE MA 02446	DONATION	250	00
6/14/14	JEWEL WARREN TOLMAN	125 WALNUT ST WATERBURY MA 02472	CAMPAIGN CONTRIBUTION	100	00
6/23/14	FRANK SMIZIK	42 RUSSETT ST BROOKLINE MA 02446	CAMPAIGN CONTRIBUTION	100	00
Line 12: Expenditures over \$50				515	00
Line 13: Expenditures \$50 and under*				37	50
<b>Line 14: TOTAL EXPENDITURES</b>				<b>552</b>	<b>50</b>

Enter on page 1, line 4

\*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.

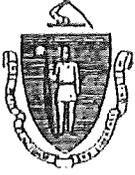
Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	NONE
			Line 17: Total In-kind	

\* 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)	NONE



Commonwealth of Massachusetts

# Schedule E Municipal Form Disclosure of Assets Statement Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

CPF ID# \_\_\_\_\_

This form should be filed by all candidates and committees with each year end and each dissolution report.

Committee Name: COMMITTEE TO ELECT BENJAMIN FRANZO Date of report: 12/31/14

All candidates and committees must fill in Part A or Part B.

**Part A:**

No assets\* were acquired or disposed of by this candidate/committee during the period covered by this statement.

**Part B:**

Assets acquired: List all assets acquired since the committee last filed this statement. If this is the first Schedule E you have filed, list all assets.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value

Assets disposed of: List all assets sold, traded or transferred during the reporting period covered by this statement.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	Disposition Value Attach statement of how value is determined.

Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.

\*An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.

Signed under the penalties of perjury:

[Signature]  
Candidate signature                      1/12/15  
Date

Signed under the penalties of perjury:

[Signature]  
Treasurer signature                      1/12/15  
Date

Attach additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.





**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 itemize only those over \$50. In addition, Section 3.1.7 of the Town By-Laws further requires that the occupation and employer must be reported for each person who contributes more than \$50 in a calendar year. Receipts of \$50 or less may be added together, from committee records, and reported on line 10 rather than line 9.*

This page may be copied if additional pages are required to report all receipts. If you do so, include your committee name and a page number on each additional page.

<b>Date received</b>	<b>Name and residential address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation and employer (for contributions over \$50)</b>
1/23/14	Ken Goldstein 111 Holland Road Brookline, MA 02445	76	00	Lawyer , Goldstein & Herndon
Line 9: Total receipts of more than \$50 (or listed above)		76	00	
Line 10: Total receipts of \$50 or less ( <b>not</b> listed above)*		0	00	
<b>Line 11: Total receipts this period</b> (Enter here and on page 1, line 2)		76	00	

\*Receipts of \$50 or less may be itemized above. If you do so, include them in Line 9 rather than Line 10. Line 10 must include only receipts not itemized above.



**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)				0.00	
Line 16: In-kind \$50 or less ( <b>not</b> listed above)					
<b>Line 17: Total in-kind contributions</b> (Enter here and on page 1, line 6)				0.00	

\*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	
<b>Line 18: Total outstanding liabilities</b> (Enter here and on page 1, line 7)				0	

**SCHEDULE E: DONORS OF \$50 AND LESS**

<b>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</b>	0	
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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.

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

File with Town Clerk of Election Commission

Please print or type all information except signatures

2015 JAN 29 PM 4:10

<b>Fill in dates:</b>	Month	Day	Year		Month	Day	Year
Reporting period beginning	January	1	2014	and ending	December	31	2014

**Report period:**

15<sup>th</sup> day before election    
  8<sup>th</sup> day before election    
  30<sup>th</sup> day after election    
  Year-end report

Kenneth Michael Goldstein  
Full name of candidate

Selectman  
Office sought

111 Holland Rd. Brookline, MA 02445  
Residential address

\_\_\_\_\_  
Tel. No. (optional)

Committee to Elect Ken Goldstein  
Committee name

Hui Jojo Deng  
Name of committee treasurer

111 Holland Rd. Brookline, MA 02445  
Committee mailing address

\_\_\_\_\_  
Tel. No. (optional)

### SUMMARY BALANCE INFORMATION

Line 1: Ending balance from previous report	\$ 399.89
Line 2: Total receipts this period (from page 2, line 11)	\$ 76.00
Line 3: Subtotal (line 1 plus line 2)	\$ 475.89
Line 4: Total expenditures this period (from page 3, line 14)	\$ 275.00
Line 5: Ending balance (line 3 minus line 4)	\$ 200.89
-----	
Line 6: Total in-kind contributions this period (from page 4)	\$ 0.00
Line 7: Total of all outstanding liabilities (from page 4)	\$ 0.00
Line 8: Name of bank used <u>TD Bank North</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 and Brookline By-Laws, sec. 3.1.7.

Signed under the penalties of perjury:

\_\_\_\_\_  
Treasurer's signature (in ink)

1/29/15  
Date

### FOR CANDIDATE FILINGS ONLY: (Candidate must sign below)

**Affidavit of Candidate: (check one 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 and Brookline By-Law 3.1.7. 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 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 and Brookline By-Laws, sec. 3.1.7.

Signed under the penalties of perjury:

\_\_\_\_\_  
Candidate's signature (in ink)

1/29/15  
Date

**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 itemize only those over \$50. In addition, Section 3.1.7 of the Town By-Laws further requires that the occupation and employer must be reported for each person who contributes more than \$50 in a calendar year. Receipts of \$50 or less may be added together, from committee records, and reported on line 10 rather than line 9.*

This page may be copied if additional pages are required to report all receipts. If you do so, include your committee name and a page number on each additional page.

Date received	Name and residential address (alphabetical listing required)	Amount		Occupation and employer (for contributions over \$50)
1/23/14	Ken Goldstein 111 Holland Road Brookline, MA 02445	76	00	Lawyer , Goldstein & Herndon
Line 9: Total receipts of more than \$50 (or listed above)		76	00	
Line 10: Total receipts of \$50 or less (not listed above)*		0	00	
<b>Line 11: Total receipts this period</b> (Enter here and on page 1, line 2)		76	00	

\*Receipts of \$50 or less may be itemized above. If you do so, include them in Line 9 rather than Line 10. Line 10 must include only receipts not itemized above.



**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)				0.00	
Line 16: In-kind \$50 or less ( <b>not</b> listed above)					
<b>Line 17: Total in-kind contributions</b> (Enter here and on page 1, line 6)				0.00	

\*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	
<b>Line 18: Total outstanding liabilities</b> (Enter here and on page 1, line 7)				0	

**SCHEDULE E: DONORS OF \$50 AND LESS**

<b>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</b>	0
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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.

# Form SEL102: Brookline Supplemental Campaign Finance Report

To be completed by candidates for the office of Selectman pursuant to  
Sec. 3.1.7 of the Town By-Laws

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

Please print or type all information except signatures

**Fill in dates:** Month Day Year and ending Month Day Year

Reporting period beginning 1/21/14 and ending 1/20/15

**Report period:**

15<sup>th</sup> day before election     8<sup>th</sup> day before election     30<sup>th</sup> day after election     Year-end report

Robert Lewis Allen  
Full name of candidate

Selectman  
Office sought

296 Russett Road, Brookline  
Residential address

\_\_\_\_\_  
Tel. No. (optional)

Committee to Elect Robert Allen  
Committee name

Thomas Daugherty, Jr.  
Name of committee treasurer

c/o 277 Russett Road Brookline  
Committee mailing address

\_\_\_\_\_  
Tel. No. (optional)

### SUMMARY BALANCE INFORMATION

Line 1: Ending balance from previous report	\$ <u>10,250.74</u>
Line 2: Total receipts this period (from page 2, line 11)	\$ <u>0.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>10,250.74</u>
Line 4: Total expenditures this period (from page 3, line 14)	\$ <u>10,250.74</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>0.00</u>
Line 6: Total in-kind contributions this period (from page 4)	\$ <u>0.00</u>
Line 7: Total of all outstanding liabilities (from page 4)	\$ <u>0.00</u>
Line 8: Name of bank used <u>Sovereign Bank ( Santander )</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 and Brookline By-Laws, sec. 3.1.7.

Signed under the penalties of perjury:

[Signature] 1/20/15  
Treasurer's signature (in ink) Date

### FOR CANDIDATE FILINGS ONLY: (Candidate must sign below)

**Affidavit of Candidate: (check one 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 and Brookline By-Law 3.1.7. 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 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 and Brookline By-Laws, sec. 3.1.7.

Signed under the penalties of perjury:

[Signature] 1/20/15  
Candidate's signature (in ink) Date

**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 itemize only those over \$50. In addition, Section 3.1.7 of the Town By-Laws further requires that the occupation and employer must be reported for each person who contributes more than \$50 in a calendar year. Receipts of \$50 or less may be added together, from committee records, and reported on line 10 rather than line 9.*

This page may be copied if additional pages are required to report all receipts. If you do so, include your committee name and a page number on each additional page.

Date received	Name and residential address (alphabetical listing required)	Amount		Occupation and employer (for contributions over \$50)
Line 9: Total receipts of more than \$50 (or listed above)		0	00	
Line 10: Total receipts of \$50 or less (not listed above)*		0	00	
<b>Line 11: Total receipts this period</b> (Enter here and on page 1, line 2)		0	00	

\*Receipts of \$50 or less may be itemized above. If you do so, include them in Line 9 rather than Line 10. Line 10 must include only 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 itemize only those over \$50. Expenditures of \$50 or less may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. If you do so, include your committee name and a page number on each additional page.

Date paid	To whom paid (listed alphabetically)	Address	Purpose of expenditure	Amount	
1/22/14	Brookline Community Foundation	40 Webster Pl Brookline, MA	Donation	\$ 250	00
2/24/14	Brookline Art Center	86 Main St. Brookline, MA	Donation	\$ 300	00
4/2/14	Rotary Charity Fund	Brookline, MA	Donation	\$ 500	00
9/2/14	Rotary District 7910 Charity Fund	Brookline, MA	Donation	\$ 500	00
9/2/14	Brookline Senior Center	93 Winchester St Brookline MA	Donation	\$ 275	59
9/1/14	Town of Brookline	333 Washington St Brookline, MA 02445	Donation	\$ 8425	15
Line 12: Total expenditures of more than \$50 (or listed above)				\$ 10,250	74
Line 13: Total expenditures of \$50 or less (not listed above)*				0	00
<b>Line 14: Total expenditures this period</b> (Enter here and on page 1, line 4)				\$ 10,250	74

\*Receipts of \$50 or less may be itemized above. If you do so, include them in line 12 rather than line 13. Line 13 must include only receipts not itemized above.

**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)				0.00	
Line 16: In-kind \$50 or less (not listed above)				0.00	
<b>Line 17: Total in-kind contributions</b> (Enter here and on page 1, line 6)				0.00	

\*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	
<b>Line 18: Total outstanding liabilities</b> (Enter here and on page 1, line 7)				0.00	

**SCHEDULE E: DONORS OF \$50 AND LESS**

<b>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</b>	10	00
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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

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
REGISTRARS OF VOTERS  
15 JAN 20 PM 2:28

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/21/14 Ending Date: 1/20/15

Type of Report: (Check one)

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

Robert Lewis Allen  
Candidate Full Name (if applicable)  
Selectman Town Wide  
Office Sought and District  
296 Russett Road, Brookline  
Residential Address  
Telephone Number (optional):

Committee to Elect Robert Allen  
Committee Name  
Thomas Dugherky, Jr.  
Name of Committee Treasurer  
C/O 277 Russett Road, Brookline  
Committee Mailing Address  
Telephone Number (optional):

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$ 10,250.74</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$ 0.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$ 10,250.74</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$ 10,250.74</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$ 0.00</u>
Line 6: Total in-kind contributions this period (page 6)	<u>\$ 0.00</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>\$ 0.00</u>
Line 8: Name of bank(s) used:	<u>Sovereign Bank (Santander)</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: 1/20/15

#### 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:

[Signature] (Candidate's signature)

Date: 1/20/15















Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/01/2014 Ending Date: 12/31/2014

Type of Report: (Check one)

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

<u>Neil Wishinsky</u> Candidate Full Name (if applicable)	<u>Committee for Neil Wishinsky Selectman</u> Committee Name
<u>Brookline Selectman</u> Office Sought and District	<u>Benjamin J. Franco</u> Name of Committee Treasurer
<u>20 Henry St. Brookline MA 02445</u> Residential Address	<u>20 Henry St. Brookline MA 02445</u> Committee Mailing Address
Telephone Number (optional): <input type="text"/>	Telephone Number (optional): <input type="text"/>

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$3401.27</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$3401.27</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>90.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$3311.27</u>
Line 6: Total in-kind contributions this period (page 6)	<u>\$0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>\$0</u>
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: 1/6/14

**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: [Signature] (Candidate's signature) Date: 1/1/2014





## 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
1/9/14	Brookline Bank	Po Box 470469 Brookline MA 02445	Monthly Account Maintenance Fee	\$ 7.50
2/10/14	Brookline Bank	Po Box 470469 Brookline MA 02445	Monthly Account Maintenance Fee	\$ 7.50
3/11/14	Brookline Bank	Po Box 470469 Brookline MA 02445	Monthly Account Maintenance Fee	\$ 7.50
4/11/14	Brookline Bank	Po Box 470469 Brookline MA 02445	Monthly Account Maintenance Fee	\$ 7.50
5/13/14	Brookline Bank	Po Box 470469 Brookline MA 02445	Monthly Account Maintenance Fee	\$ 7.50
6/12/14	Brookline Bank	Po Box 470469 Brookline MA 02445	Monthly Account Maintenance Fee	\$ 7.50
7/11/14	Brookline Bank	Po Box 470469 Brookline MA 02445	Monthly Account Maintenance Fee	\$ 7.50
8/13/14	Brookline Bank	Po Box 470469 Brookline MA 02445	Monthly Account Maintenance Fee	\$ 7.50
9/11/14	Brookline Bank	Po Box 470469 Brookline MA 02445	Monthly Account Maintenance Fee	\$ 7.50
10/14/14	Brookline Bank	Po Box 470469 Brookline MA 02445	Monthly Account Maintenance Fee	\$ 7.50
11/13/14	Brookline Bank	Po Box 470469 Brookline MA 02445	Monthly Account Maintenance Fee	\$ 7.50
12/15/14	Brookline Bank	Po Box 470469 Brookline MA 02445	Monthly Account Maintenance Fee	\$ 7.50
Line 12: Total Expenditures over \$50 (or listed above)				\$ 90.00
Line 13: Total Expenditures \$50 and under* (not listed above)				\$ 0
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$ 90.00

Enter on page 1, line 4 g

\* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.









# Form SEL102: Brookline Supplemental Campaign Finance Report

To be completed by candidates for the office of Selectman pursuant to Sec. 3.1.7 of the Town By-Laws

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

Please print or type all information except signatures

Fill in dates: Reporting period beginning Month JAN Day 1 Year 2014 and ending Month DEC Day 31 Year 2014

Report period:  
 15<sup>th</sup> day before election     8<sup>th</sup> day before election     30<sup>th</sup> day after election     Year-end report

RICHARD (DICK) BENKA  
Full name of candidate  
Selectman  
Office sought  
26 CIRCUIT ROAD  
Residential address  
CHESTNUT HILL 02467  
Tel. No. (optional)

DICK BENKA FOR SELECTMAN  
Committee name  
JONATHAN S. FINE  
Name of committee treasurer  
37 WILLOW CRESCENT  
Committee mailing address  
BROOKLINE 02445  
Tel. No. (optional)

### SUMMARY BALANCE INFORMATION

Line 1: Ending balance from previous report	\$ <u>1,115.55</u>
Line 2: Total receipts this period (from page 2, line 11)	\$ <u>0.30</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>1,115.85</u>
Line 4: Total expenditures this period (from page 3, line 14)	\$ <u>550.00</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>565.85</u>
Line 6: Total in-kind contributions this period (from page 4)	\$ <u>—</u>
Line 7: Total of all outstanding liabilities (from page 4)	\$ <u>—</u>
Line 8: Name of bank 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 and Brookline By-Laws, sec. 3.1.7.  
Jonathan S. Fine  
Treasurer's signature (in ink)      Signed under the penalties of perjury:      01-19-2015  
Date

### FOR CANDIDATE FILINGS ONLY: (Candidate must sign below)

**Affidavit of Candidate: (check one 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 and Brookline By-Law 3.1.7. 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 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 and Brookline By-Laws, sec. 3.1.7.  
Richard D. Benka  
Candidate's signature (in ink)      Signed under the penalties of perjury:      1/19/15  
Date

**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 itemize only those over \$50. In addition, Section 3.1.7 of the Town By-Laws further requires that the occupation and employer must be reported for each person who contributes more than \$50 in a calendar year. Receipts of \$50 or less may be added together, from committee records, and reported on line 10 rather than line 9.*

This page may be copied if additional pages are required to report all receipts. If you do so, include your committee name and a page number on each additional page.

Date received	Name and residential address (alphabetical listing required)	Amount		Occupation and employer (for contributions over \$50)
Line 9: Total receipts of more than \$50 (or listed above)		—		
Line 10: Total receipts of \$50 or less (not listed above)*		0 30		
Line 11: Total receipts this period (Enter here and on page 1, line 2)		0 30		Interest adjustment through 12/15/14

\*Receipts of \$50 or less may be itemized above. If you do so, include them in Line 9 rather than Line 10. Line 10 must include only receipts not itemized above.



### 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
<b>Line 15: In-kind over \$50 (or listed above)</b>				—
<b>Line 16: In-kind \$50 or less (not listed above)</b>				—
<b>Line 17: Total in-kind contributions</b> (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
<b>Line 18: Total outstanding liabilities</b> (Enter here and on page 1, line 7)				—

### SCHEDULE E: DONORS OF \$50 AND LESS

<b>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</b>	—
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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

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

2015 JAN 20 A 8:52

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/14 Ending Date: 12/31/14

Type of Report: (Check one)

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

RICHARD (DICK) BENKA  
Candidate Full Name (if applicable)

SELECTMAN  
Office Sought and District

26 CIRCUIT ROAD 02467  
Residential Address

Telephone Number (optional): 617-277-6102

DICK BENKA FOR SELECTMAN  
Committee Name

JONATHAN S. FINE  
Name of Committee Treasurer

57 WILLOW CRESCENT  
Committee Mailing Address

BROOKLINE 02445  
Telephone Number (optional):

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>1,115.55</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0.30</u>
Line 3: Subtotal (line 1 plus line 2)	<u>1,115.85</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>550.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>565.85</u>
Line 6: Total in-kind contributions this period (page 6)	<u>-</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>-</u>
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: Jonathan S. Fine (Treasurer's signature) Date: 01-19-2015

#### 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: Richard M Benka (Candidate's signature) Date: 1/19/15





### 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
<b>Line 15: In-kind over \$50</b>				—
<b>Line 16: In-kind \$50 and under</b>				—
<b>Line 17: Total In-kind</b>				✓

Enter on page 1, line 6

\* 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
<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>				✓

Enter on page 1, line 7



**Schedule E  
Municipal Form  
Disclosure of Assets Statement  
Office of Campaign and Political Finance**

Commonwealth  
of Massachusetts

File with: City or Town Clerk or Election Commission

CPF ID# \_\_\_\_\_

This form should be filed by all candidates and committees with each year end and each dissolution report.

Committee Name: DICK BENKA FOR SELECTMAN Date of report: 1/20/15

**All candidates and committees must fill in Part A or Part B.**

**Part A:**

No assets\* were acquired or disposed of by this candidate/committee during the period covered by this statement.

**Part B:**

Assets acquired: List all assets acquired since the committee last filed this statement. If this is the first Schedule E you have filed, list all assets.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value

Assets disposed of: List all assets sold, traded or transferred during the reporting period covered by this statement.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	Disposition Value Attach statement of how value is determined.

Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.

\*An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.

Signed under the penalties of perjury:

Signed under the penalties of perjury:

*Richard M. Benka* 1/19/15  
Candidate signature Date

*Jonathan S. Fine* 01-19-2015  
Treasurer signature Date

Attach additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.





Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/14 Ending Date: 12/31/14

Type of Report: (Check one)

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

Jesse Mermell  
Candidate Full Name (if applicable)  
Selectman  
Office Sought and District  
149 Wintrop Rd. #8 Brookline  
Residential Address  
E-mail: jesse@jessermell.com  
Phone # (optional): \_\_\_\_\_

Jesse Mermell  
Committee Name  
Jeanne Sabram  
Name of Committee Treasurer  
149 Wintrop Rd. #8 Brookline  
Committee Mailing Address  
E-mail: jesse@jessermell.com  
Phone # (optional): \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK  
DEC 13 10 40

Line 1: Ending Balance from previous report	<u>4018.31</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>4018.31</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>4018.31</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
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: \_\_\_\_\_

(Treasurer's signature)

Date: 12/9/18

#### 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: 12/9/18



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

2015 FEB 17 10:11 AM  
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01-1-14 Ending Date: 12-31-14

Type of Report: (Check one)

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

VIVIAN GOLDMAN  
Candidate Full Name (if applicable)

LIBRARY TRUSTEE  
Office Sought and District

19 CONANT RD., BROOKLINE 02467  
Residential Address

Telephone Number (optional): 617-699-8197

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

### SUMMARY BALANCE INFORMATION:

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

#### 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: Vivian Goldman (Candidate's signature) Date: 2/12/2015















Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

2015 FEB 17 A 9:51

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: May 30, 2013 Ending Date: Feb. 12, 2015

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

PUSA MEHTA  
Candidate Full Name (if applicable)  
Library Trustee  
Office Sought and District  
50 Jamaica Road, Brookline, MA  
Residential Address  
Telephone Number (optional): 617 383 7346

Committee to Elect Pujja Mehta  
Committee Name  
Ankit Mahadewa  
Name of Committee Treasurer  
33 Pond Ave., Apt 1103, Brookline, MA  
Committee Mailing Address  
Telephone Number (optional): 410 419 2378

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$1689.38</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$1689.38</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$1689.38</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>Citizens</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: Ankit Mahadewa (Treasurer's signature) Date: 2/11/15

**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: Pujja Mehta (Candidate's signature) Date: 2/11/15















Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report

## Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN CLERK  
JAN 7 2015

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="208.48"/>
Line 2: Total receipts this period (page 2, line 11)	<input type="text" value="1"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="209.48"/>
Line 4: Total expenditures this period (page 3, line 14)	<input type="text" value="55"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="154.58"/>
Line 6: Total in-kind contributions this period (page 4)	<input type="text" value="0"/>
Line 7: Total (all) outstanding liabilities (page 5)	<input type="text" value="700"/>
Line 8: Name of bank(s) used:	<input type="text" value="Brookline Bank"/>

**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:

Burstein for Brookline  
page 1











Commonwealth of Massachusetts

# Schedule E Municipal Form Disclosure of Assets Statement Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

CPF ID# \_\_\_\_\_

This form should be filed by all candidates and committees with each year end and each dissolution report.

Committee Name: Burstein for Brookline Date of report: 12/31/14

All candidates and committees must fill in Part A or Part B.

### Part A:

No assets\* were acquired or disposed of by this candidate/committee during the period covered by this statement.

### Part B:

Assets acquired: List all assets acquired since the committee last filed this statement. If this is the first Schedule E you have filed, list all assets.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value

Assets disposed of: List all assets sold, traded or transferred during the reporting period covered by this statement.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	Disposition Value Attach statement of how value is determined.

Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.

\*An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.

Signed under the penalties of perjury:

Michael A. Burstein 12/31/14  
Candidate signature Date

Signed under the penalties of perjury:

[Signature] 12/31/14  
Treasurer signature Date

Attach additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.

9/96



Burstein for Brookline  
page 6



# Form CPF M102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Jan 2, 2014 Ending Date: Dec 31, 2014

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

Gary D. Souer  
Candidate Full Name (if applicable)  
Library Trustee  
Office Sought and District  
70 Francis St, Brookline, MA  
Residential Address  
Telephone Number (optional): 617 731 1611

None  
Committee Name  
Name of Committee Treasurer  
Committee Mailing Address  
Telephone Number (optional):

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>0</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: \_\_\_\_\_ (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: 1/20/15















Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-14 Ending Date: 12-31-14

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

Regina Kealy  
Candidate Full Name (if applicable)  
Library Trustee  
Office Sought and District  
20 Chapel St B407 Brookline  
Residential Address  
Telephone Number (optional): 017-277-5805

Committee Name  
Name of Committee Treasurer  
Committee Mailing Address  
Telephone Number (optional):

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>0</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: Regina Kealy (Treasurer's signature) Date: 2/3/15

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: Regina Kealy (Candidate's signature) Date: 2/3/15















Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Feb. 2014 Ending Date: 12/31/2014

Type of Report: (Check one)

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

Magdalene Moran  
Candidate Full Name (if applicable)

Library Trustee Brookline  
Office Sought and District

79 University Rd #1  
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: \_\_\_\_\_

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 14): \_\_\_\_\_

Line 5: Ending Balance (line 3 minus line 4): \_\_\_\_\_

Line 6: Total in-kind contributions this period (page 6): \_\_\_\_\_

Line 7: Total (all) outstanding liabilities (page 7): \_\_\_\_\_

Line 8: Name of bank(s) used: \_\_\_\_\_

*No funds were raised*

**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: Magdalene Moran (Candidate's signature) Date: 1/16/2015



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

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="\$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: Serena Heartz (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: [Signature] (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

2015 FEB -5 A 8:11

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2014 Ending Date: 12/31/2014

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

Abigail Cox  
Candidate Full Name (if applicable)

School Committee  
Office Sought and District

18 Osborne Rd, Brookline  
Residential Address

Telephone Number (optional): 617-566-3212

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

### SUMMARY BALANCE INFORMATION:

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

**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: Abigail Cox (Candidate's signature) Date: 2/3/2015











Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report

## Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

2015 FEB 23 12 16 11

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="0.00"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="0.00"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="0.00"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="0.00"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="0.00"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text" value="0.00"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text" value="0.00"/>
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:













QuickTime™ and a TIFF (Uncompressed) decompressor are needed to see this picture.

# Form SEL102: Brookline Supplemental Campaign Finance Report

To be completed by candidates for the office of Selectman pursuant to Sec. 3.1.7 of the Town By-Laws

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

Please print or type all information except signatures

2015 JAN 15 P 1:29

Fill in dates: Reporting period beginning 01 / 01 / 2014 and ending 12 / 31 / 2014

Report period:  
 15<sup>th</sup> day before election   
 8<sup>th</sup> day before election   
 30<sup>th</sup> day after election   
 Year-end report

Neil Wishinsky  
 Full name of candidate  
Selectman  
 Office sought  
20 Henry St., Brookline MA 02445  
 Residential address

Committee For Neil Wishinsky Selectman  
 Committee name  
Benjamin J. Franco  
 Name of committee treasurer  
20 Henry St. Brookline MA 02445  
 Committee mailing address

Tel. No. (optional)

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION

Line 1: Ending balance from previous report	\$ <u>3401.27</u>
Line 2: Total receipts this period (from page 2, line 11)	\$ <u>0</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>3401.27</u>
Line 4: Total expenditures this period (from page 3, line 14)	\$ <u>90.00</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>3311.27</u>
-----	
Line 6: Total in-kind contributions this period (from page 4)	\$ <u>0</u>
Line 7: Total of all outstanding liabilities (from page 4)	\$ <u>0</u>
Line 8: Name of bank 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 and Brookline By-Laws, sec. 3.1.7.

Signed under the penalties of perjury:

[Signature]  
 Treasurer's signature (in ink)

1/6/15  
 Date

#### FOR CANDIDATE FILINGS ONLY: (Candidate must sign below)

#### Affidavit of Candidate: (check one 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 and Brookline By-Law 3.1.7. 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 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 and Brookline By-Laws, sec. 3.1.7.

Signed under the penalties of perjury:

[Signature]  
 Candidate's signature (in ink)

1/7/2015  
 Date

**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 itemize only those over \$50. In addition, Section 3.1.7 of the Town By-Laws further requires that the occupation and employer must be reported for each person who contributes more than \$50 in a calendar year. Receipts of \$50 or less may be added together, from committee records, and reported on line 10 rather than line 9.*

This page may be copied if additional pages are required to report all receipts. If you do so, include your committee name and a page number on each additional page.

Date received	Name and residential address (alphabetical listing required)	Amount		Occupation and employer (for contributions over \$50)
Line 9: Total receipts of more than \$50 (or listed above)		0	00	
Line 10: Total receipts of \$50 or less (not listed above)*		0	00	
<b>Line 11: Total receipts this period</b> (Enter here and on page 1, line 2)		0	00	

\*Receipts of \$50 or less may be itemized above. If you do so, include them in Line 9 rather than Line 10. Line 10 must include only receipts not itemized above.



### 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)				\$ <del>0</del>
Line 16: In-kind \$50 or less (not listed above)				\$ <del>0</del>
<b>Line 17: Total in-kind contributions</b> (Enter here and on page 1, line 6)				\$ <del>0</del>

\*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
<b>Line 18: Total outstanding liabilities</b> (Enter here and on page 1, line 7)				\$ <del>0</del>

### SCHEDULE E: DONORS OF \$50 AND LESS

<b>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</b>	\$ <del>0</del>	<del>0</del>
---	-----------------	--------------

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

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

2015 FEB 23 P: 2:02

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="00.00"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="00.00"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="00.00"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="00.00"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="00.00"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text" value="00.00"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text" value="00.00"/>
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:











# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

1/1/2014

Ending Date:

12/31/2014

Type of Report: (Check one)

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

Judith A. Vanderkay  
Candidate Full Name (if applicable)

Brookline Library Trustee  
Office Sought and District TMM #9

16 Columbia St, 02446  
Residential Address

Telephone Number (optional): 617-731-0013

\_\_\_\_\_  
Committee Name

\_\_\_\_\_  
Name of Committee Treasurer

\_\_\_\_\_  
Committee Mailing Address

Telephone Number (optional): \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	_____

#### 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:

N/A

(Treasurer's signature)

Date: 2/19/15

#### 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:

Judith A. Vanderkay

(Candidate's signature)

Date: 2/19/15















Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2015 FEB 11 A 11:31

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 6-5-14 Ending Date: 12-31-14

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

LISA JACKSON  
Candidate Full Name (if applicable)

School Committee, Brookline  
Office Sought and District

47 Winthrop Rd #1 Brookline  
Residential Address

Telephone Number (optional): \_\_\_\_\_

The Committee to Elect Lisa Jackson  
Committee Name

Chris Johnson  
Name of Committee Treasurer

76 Filler St. #1, Brookline  
Committee Mailing Address

Telephone Number (optional): \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>746.94</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u><del>476</del> 746.94</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>98.44</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>648.50</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>Bank of America</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: \_\_\_\_\_ (Treasurer's signature) Date: 2-8-15

**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: 2-7-15















Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 6/15/14 Ending Date: 12/31/14

Type of Report: (Check one)

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

Michael Andrew Glover  
Candidate Full Name (if applicable)

School Committee  
Office Sought and District

4 Franklin Court  
Residential Address

Telephone Number (optional): \_\_\_\_\_

Committee to Elect Michael Glover  
Committee Name

Jessica Mols  
Name of Committee Treasurer

4 Franklin Court  
Committee Mailing Address

Telephone Number (optional): \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$50.00</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>50.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$50.00</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>Bank of America</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: \_\_\_\_\_

#### 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: [Signature] (Candidate's signature) Date: \_\_\_\_\_















Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report

## Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN CLERK  
BROOKLINE  
JAN 16 4:11:32

Fill in Reporting Period dates: Beginning Date:  Ending Date:  File with:  City or Town Clerk or Election Commission

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:**

<b>Line 1:</b> Ending Balance from previous report	3,333.38
<b>Line 2:</b> Total receipts this period (page 3, line 11)	50.99
<b>Line 3:</b> Subtotal (line 1 plus line 2)	3,384.37
<b>Line 4:</b> Total expenditures this period (page 5, line 14)	40.57
<b>Line 5:</b> Ending Balance (line 3 minus line 4)	3,343.8
<b>Line 6:</b> Total in-kind contributions this period (page 6)	116.46
<b>Line 7:</b> Total (all) outstanding liabilities (page 7)	5,000
<b>Line 8:</b> Name of bank(s) used:	Brookline Bank

**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 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
Mar 22, 2014	Joseph M. Ditkoff	145 Mason Terrace, Brookline, MA 02446	web hosting (Yahoo! Small Business)	38.82
Jun 22, 2014	Joseph M. Ditkoff	145 Mason Terrace, Brookline, MA 02446	web hosting (Yahoo! Small Business)	38.82
Sep 22, 2014	Joseph M. Ditkoff	145 Mason Terrace, Brookline, MA 02446	web hosting (Yahoo! Small Business)	38.82
Line 15: In-Kind Contributions over \$50 (or listed above)				116.46
Line 16: In-Kind Contributions \$50 & under (not listed above)				
<b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>				<b>116.46</b>

Enter on page 1, line 6 →

\* 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.





Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

2015 FEB 26 P 3:21  
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="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"/>

**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: Rebecca E. Stone (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

2015 FEB 26 P 12:43

Fill in Reporting Period dates: Beginning Date: Jan Feb 2014 Ending Date: Dec. 31, 2014  
File with: City or Town Clerk or Election Commission

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

Magdalene M. Moran  
Candidate Full Name (if applicable)  
Brookline Library Trustee  
Office Sought and District  
79 University Road #1  
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	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</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] (Treasurer's signature) Date: 2/11/2015

#### 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: [Signature] (Candidate's signature) Date: 2/11/2015















Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report

## Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

2015 File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 11/14 Ending Date: 12/31/14

Type of Report: (Check one)

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

PEN-HAU BEN CHANG  
Candidate Full Name (if applicable)

BROOKLINE SCHOOL COMMITTEE  
Office Sought and District

342 TAPPAN ST.  
Residential Address

Telephone Number (optional): \_\_\_\_\_

NONE  
Committee Name

NONE  
Name of Committee Treasurer

NONE  
Committee Mailing Address

Telephone Number (optional): \_\_\_\_\_

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>NONE</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: \_\_\_\_\_ (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: \_\_\_\_\_















# 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:

1/1/2014

Ending Date:

12/31/2014

Type of Report: (Check one)

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

Thomas John Vitolo

Candidate Full Name (if applicable)

Constable

Office Sought and District

153 University Rd Brookline MA 02445

Residential Address

Telephone Number (optional):

Committee to Elect Tommy Vitolo

Committee Name

Linda Jason

Name of Committee Treasurer

21 Bartlett Cres #2 Brookline MA 02446

Committee Mailing Address

Telephone Number (optional):

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

0

Line 4: Total expenditures this period (page 5, line 14)

0

Line 5: Ending Balance (line 3 minus line 4)

0

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used: 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:

*Thomas Vitolo*

(Candidate's signature)

Date:

1/26/14











Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2015 FEB 11 P 12:41

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/14 Ending Date: 12/31/14

Type of Report: (Check one)

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

Joseph Figler  
Candidate Full Name (if applicable)

Constable Town of Brookline  
Office Sought and District

396 Newton St, Chestnut Hill.  
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	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>NA</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: \_\_\_\_\_ (Treasurer's signature)    Date: 2/6/15

**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: 2/6/15













Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN OF BROOKLINE  
TOWN CLERK

2015 FEB -6 A 10:14  
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-2014 Ending Date: 12-31-2014

Type of Report: (Check one)

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

Cheryl Anne Snyder  
Candidate Full Name (if applicable)  
Constable  
Office Sought and District  
11 White Place  
Residential Address  
Telephone Number (optional): 617-584-5812

N/A  
Committee Name  
  
Name of Committee Treasurer  
  
Committee Mailing Address  
Telephone Number (optional):

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</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: \_\_\_\_\_ (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: [Signature] (Candidate's signature) Date: 2-6-15









## 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
				<del>0</del>
Line 15: In-Kind Contributions over \$50 (or listed above)				0
Line 16: In-Kind Contributions \$50 & under (not listed above)				0
Enter on page 1, line 6 → <b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>				0

\* 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
				<del>0</del>
Enter on page 1, line 7 → <b>Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)</b>				<del>0</del>







### 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	None
			Line 17: Total In-kind	None

\* 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)	None

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 OF BROOKLINE  
CLERK

2015 FEB 17 11:36

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 6/7/14 Ending Date: 12/31/14

Type of Report: (Check one)

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

Joanne M. Sullivan  
Candidate Full Name (if applicable)  
Housing Authority  
Office Sought and District  
63 Longwood Ave #6 Brookline  
Residential Address  
Telephone Number (optional): 617-566-0847

Committee Name  
Name of Committee Treasurer  
Committee Mailing Address  
Telephone Number (optional):

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	<u>NA</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: \_\_\_\_\_ (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: Joanne M. Sullivan (Candidate's signature) Date: 2/9/15















Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2015 FEB 17 11:31

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: JAN 1, 2018 Ending Date: DEC 31, 2017

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): \_\_\_\_\_

MIKE JACOBS FOR HOUSING AUTHORITY  
Committee Name

IRENE J SEOF  
Name of Committee Treasurer

41 COOLIDGE ST, BROOKLINE, MA 02446  
Committee Mailing Address

Telephone Number (optional): \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$ 623.90
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	\$ 623.90
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	\$ 623.90
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	BROOKLINE BANK

#### 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: 1/29/15

#### 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: [Signature] (Candidate's signature) Date: 1/29/15











## 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
	N/A			
Enter on page 1, line 7 → <b>Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)</b>				0