

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

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

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

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

SCHEDULE D: LIABILITIES

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

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

SCHEDULE E: DONORS OF \$50 AND LESS

Line 19: Total number of donors in this period whose aggregate contributions (including in-kind contributions) equal an amount or value of \$50.00 or less		
---	--	--

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: 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

Brooks A. Ames
Candidate Full Name (if applicable)
Selectman
Office Sought and District
25 Whitney St. Brookline MA 02467
Residential Address
Telephone Number (optional):

Committee to Elect Brooks Ames
Committee Name
Mariela Ames
Name of Committee Treasurer
25 Whitney St. Brookline, MA 02467
Committee Mailing Address
Telephone Number (optional):

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<input type="text" value="5,258.14"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="500.00"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="5,758.14"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="5,758.14"/>
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"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text"/>
Line 8: Name of bank(s) used:	<input type="text" value="Century 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:

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:

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
5/3/14	Scot Higgins	2 Oliver Place, #2 Brookline, MA	Campaign function (half state) supplies	175.00
5/1/14	Mable Ford Productions	8 Beacon Ave Newburyport, MA 01950	Mailing (half state)	1,148.33
5/4/14	Trader Joe's	1317 Beacon St. Brookline, MA 02446	Party Supplies (half state)	56.26
6/4/14	Brooks Ames	25 Whitney St. Brookline, MA 02467	repayment of campaign loan	4302.45
Line 12: Total Expenditures over \$50 (or listed above)				5682.04
Line 13: Total Expenditures \$50 and under* (not listed above)				76.10
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				5758.14

* 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 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
	Liabilities	have been	satisfied.	
Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)			

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)		25	25	
Line 10: Total receipts of \$50 or less (not listed above)*		25	00	
Line 11: Total receipts this period (Enter here and on page 1, line 2)		25	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	
4/8/14	Ivana Guardia				
Line 15: In-kind over \$50 (or listed above)					
Line 16: In-kind \$50 or less (not listed above)					
Line 17: Total in-kind contributions (Enter here and on page 1, line 6)					

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

SCHEDULE D: LIABILITIES

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

Date incurred	To whom due	Address	Purpose	Amount	
	Liabilities have been satisfied. NO NO outstanding liabilities to report.				
Line 18: Total outstanding liabilities (Enter here and on page 1, line 7)					

SCHEDULE E: DONORS OF \$50 AND LESS

Line 19: Total number of donors in this period whose aggregate contributions (including in-kind contributions) equal an amount or value of \$50.00 or less		
---	--	--

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

2014 JUN -4 P 1:12

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates: Reporting Period Beginning 4 28 2014 Ending 6 4 2014

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

ARTHUR CONQUEST
Full Name of Candidate (if applicable)
SELECTMAN
Office Sought and District
115 TAPPAN ST.
Residential Address
BROOKLINE, MA 02445
Tel. No. (optional)
617-277-3253

COMMITTEE TO ELECT ARTHUR CONQUEST
Committee Name
VIRGINIA CONQUEST
Name of Committee Treasurer
115 TAPPAN ST.
Committee Mailing Address
BROOKLINE, MA 02445
Tel. No. (optional)
617-277-3253

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>3408.14</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>25.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>3433.14</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>3433.14</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>0</u>

Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <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:

Virginia Conquest
Treasurer's signature (in ink)

6/4/14
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:

Arthur Conquest
Candidate signature (in ink)

6/4/14
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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				

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)				

Enter on page 1, line 7





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: 2014 JUN 05 12:07

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

Reporting period beginning April 29, 2014 and ending June 5, 2014

Report period:

15th day before election 8th day before election 30th day after election Year-end report

Nancy Daly
Full name of candidate
Selectman
Office sought
161 Rawson Rd.
Residential address 02445
Brookline, MA 617-232-0728
Tel. No. (optional)

Committee to Elect Nancy Daly
Committee name
Ronald Scharlock
Name of committee treasurer
121 Colbourne Crescent
Committee mailing address
Brookline 02445 617-232-7418
Tel. No. (optional)

SUMMARY BALANCE INFORMATION

Line 1: Ending balance from previous report	\$ <u>8458.51</u>
Line 2: Total receipts this period (from page 2, line 11)	\$ <u>1205.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>9663.51</u>
Line 4: Total expenditures this period (from page 3, line 14)	\$ <u>4333.32</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>5330.19</u>
Line 6: Total in-kind contributions this period (from page 4)	\$ <u>35.00</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:

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:

Candidate's signature (in ink) Nancy Daly Date June 5, 2014

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	
5/6/14	Amy Hummell	226 Clark Rd. Brookline, MA 02445	2 cakes for Victory party	\$	35.00
Line 15: In-kind over \$50 (or listed above)					
Line 16: In-kind \$50 or less (not listed above)					
Line 17: Total in-kind contributions (Enter here and on page 1, line 6)					

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

SCHEDULE D: LIABILITIES

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

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

SCHEDULE E: DONORS OF \$50 AND LESS

Line 19: Total number of donors in this period whose aggregate contributions (including in-kind contributions) equal an amount or value of \$50.00 or less	5
---	----------

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

2014 JUN 13 P 12:07

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: April 29, 2014 Ending Date: June 5, 2014

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

Nancy Daly
Candidate Full Name (if applicable)

Bd. of Selectmen, Town of Brookline
Office Sought and District

161 Rawson Rd., Brookline, MA 02445
Residential Address

Telephone Number (optional): 617-232-0728

Committee to Elect Nancy Daly
Committee Name

Ronald Scharlock
Name of Committee Treasurer

121 Colbourne Crescent, Brookline, MA 02445
Committee Mailing Address

Telephone Number (optional): 617-232-7418

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$ 8458.51</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$ 1205.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$ 9663.51</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$ 4333.32</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$ 5330.19</u>
Line 6: Total in-kind contributions this period (page 6)	<u>\$ 35.00</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: _____

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: Nancy Daly (Candidate's signature) Date: June 5, 2014

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4/29/14	Mary & Murray Dewant 90 Tuxtelh Rd. 02446	\$30.00	Landscape Designer/ Artist self.
4/29/14	Janet & Jim Fitzgibbons 40 Norfolk Rd. Chestnut H. 02161	\$100.00	Retired
4/29/14	Elena Olson 61 Welland Rd. Brookline 02145	\$100.00	Hospital Administrator
4/29/14	Antoinette Schroder 344 Tappan St. Brookline 02145	\$25.00	retired
4/30/14	Pamela Zelnick 5 Carlton St. Brookline 02446	\$200.00	Realtor
5/2/14	Daniel Lyons & Mary Russell 40 Brook St., Brookline 02445	\$100.00	Realtor
5/5/14	Charles Osborne 74 Davis Ave. Brookline 02445	\$250.00	Architect
5/5/14	Richard & Carla Benka 26 Circuit Rd. Chestnut H. 02161	\$100.00	Teacher
5/5/14	Brookline Police Assoc. 350 Washington St. Brookline 02145	\$100.00	Union
5/6/14	Hugh Mattison 209 Pond Ave. Brookline 02445	\$50.00	retired
5/9/14	Stanley & Diana Spiegel 30 Stetson St. Brookline 02446	\$100.00	retired
5/9/14	Roberta Wintzger 1160 Beacon St., Apt. 301	\$50.00	retired
Line 9: Total Receipts over \$50 (or listed above)		\$205.00	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$205.00	← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE 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
4/28/14	Connolly Printing	17B Gill St. Woburn, MA 01801	printing & postage Frog. Voter mailing	\$1995.91
4/28/14	US Post Office	Chestnut Hill, MA 12 Middlesex	stamps for Dear Friend cards	\$68.00
5/1/14	Community News - paper, Inc.	Needham, MA	Political Ad	\$1846.85
5/6/14	Stop & Shop 155 Harvard St. Brookline	155 Harvard St. Brookline, MA 02446	food for victory party	\$66.85
5/6/14	Clear Flour Bread	178 Thorndike St. Brookline, MA 02446	food for victory party	\$12.20
5/6/14	Gimbal's Liquors	1637 Beacon St. Brookline 02445	wine for victory party	\$153.77
5/19/14	US Post Office Beacon St. Brookline	1295 Beacon St. Brookline, MA	postage for thank you letters	\$148.96
5/6/14	Fed Ex Office	1370 Beacon St. Brookline 02446	photocopies of campaign flyers	\$39.78
Line 12: Total Expenditures over \$50 (or listed above)				\$4333.32
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$4333.32

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 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: TOTAL OUTSTANDING LIABILITIES (ALL)	



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

2014 JUN -5 A 10:18

Please print or type all information except signatures

Fill in dates: Reporting period beginning APRIL 27 2014 and ending JUNE 3 2014

Report period: 15th day before election 8th day before election 30th day after election Year-end report

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

COMMITTED 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	\$ 6257.38
Line 2: Total receipts this period (from page 2, line 11)	\$ 612.00
Line 3: Subtotal (line 1 plus line 2)	\$ 6869.38
Line 4: Total expenditures this period (from page 3, line 14)	\$ 2173.21
Line 5: Ending balance (line 3 minus line 4)	\$ 4696.17
Line 6: Total in-kind contributions this period (from page 4)	\$ 138.69
Line 7: Total of all outstanding liabilities (from page 4)	\$ 200.00
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.

[Signature] Signed under the penalties of perjury: 6/4/14
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.

[Signature] Signed under the penalties of perjury: 5/14/14
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)				138.69	
Line 17: Total in-kind contributions (Enter here and on page 1, line 6)				138.69	

*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

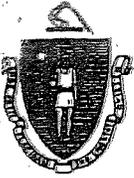
M.G.L. c. 55 requires committees to report ALL outstanding liabilities, including those which have been reported previously as well as those incurred during this reporting period.

Date incurred	To whom due	Address	Purpose	Amount	
4/12/14	THOMAS VITOLO	UNIVERSITY RD BROOKLINE	CAMPAIGN EVENT	200	00
Line 18: Total outstanding liabilities (Enter here and on page 1, line 7)				200	00

SCHEDULE E: DONORS OF \$50 AND LESS

Line 19: Total number of donors in this period whose aggregate contributions (including in-kind contributions) equal an amount or value of \$50.00 or less	6
--	---

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

2014 JUN -5 A 10:18

Commonwealth
of Massachusetts

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning April 27 2014 Ending JUNE 3 2014

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
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>6257.38</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>612.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>6869.38</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>2173.21</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>4696.17</u>

Line 6: Total in-kind contributions this period (page 4)	\$ <u>138.69</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>200.00</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] 6/4/14
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] 6/4/14
Candidate signature (in ink) 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				135.89
Line 17: Total In-kind				135.69

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
4/12/14	THOMAS UTOLO	UNIVERSITY ROAD BROOKLINE	CAMPAIGN EVENT	200.00
Line 18: OUTSTANDING LIABILITIES (ALL)				200.00

Enter on page 1, line 7



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

TOWN OF BROOKLINE
TOWN CLERK
2015 FEB 26 P 12:43

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: April 2014 Ending Date: May 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)

Brookline Public Library
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: _____

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: 2/13/2015



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 - File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 4/28/14 Ending Date: 6/5/14

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

GARY SONES
Candidate Full Name (if applicable)
Traute Public Library
Office Sought and District
70 Francis St
Residential Address
Telephone Number (optional): 617 7311611

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 the committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: _____ (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

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"/>

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

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

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

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

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

SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				



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 21 P 3:25

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 PROBLEMS
TOWN CLERK

2015 FEB 18 A 0 23

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 5/6/14 Ending Date: 6/15/14

Type of Report: (Check one)

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

Michael Andrew Glaser
Candidate Full Name (if applicable)

School Committee
Office Sought and District

4 Franklin Court
Residential Address

Telephone Number (optional): _____

Committee to Elect Michael Glaser
Committee Name

Jessica Muls
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 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 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 0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0 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: 2/18/15

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: 2/18/15



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

TOWN OF BROOKLINE
TOWN CLERK

2015 FEB 11 AM 11:31

4-28-14

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 4-28-14 Ending Date: 6-5-14

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 Fuller St. Unit 1, Brookline
Committee Mailing Address

Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>602.42</u>
Line 2: Total receipts this period (page 3, line 11)	<u>200.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>802.42</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>55.48</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>746.94</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

2015 FEB 17 P 1:36

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 4/28/14 Ending Date: 6/6/14

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 Brookline MA
Residential Address

Telephone Number (optional): 617-566-0877

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> <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: Jo M. Sullivan (Candidate's signature) Date: 2/9/15

