

Form CPF M 102-S: Brookline Supplemental Campaign Finance Report

Sec. 4.9 of the Town By-Laws

RECEIVED
TOWN OF BROOKLINE
TOWN CLERK

Please print or type all information except signatures 2019 NOV 25 A 10:34

Fill in dates: Reporting period beginning <u> </u> <small>Month</small> <u>Sept</u> <small>Day</small> <u>10</u> <small>Year</small> <u>2019</u> and ending <u>November</u> <small>Month</small> <u>15</u> <small>Day</small> <u>2019</u> <small>Year</small>
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Report period: <input checked="" type="checkbox"/> 15 th day before election

Full name of candidate	Campaign for Driscoll
Office sought	Committee name C. Scott Ananian
Residential address	Name of committee treasurer 103 Griggs Rd
Tel. No. (optional)	Committee mailing address Brookline, MA 02446
	Tel. No. (optional)

SUMMARY BALANCE INFORMATION

Line 1: Ending balance from previous report	\$ <u> 0</u>
Line 2: Total receipts this period (from page 2, line 11)	\$ <u>13,199.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>13,199.00</u>
Line 4: Total expenditures this period (from page 3, line 14)	\$ <u>3,578.74</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>9,620.26</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>5,766.44</u>
Line 8: Name of bank 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 and Brookline By-Laws, sec. 4.9.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Nov 25, 2019
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. 4.9.

Signed under the penalties of perjury:

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 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)
9/15/2019	Sharon Abramowitz 107 University Rd #4 Brookline, MA 02445	100	
11/15/2019	C. Scott Ananian 103 Griggs Rd Brookline, MA 02446	325	Software Engineer Wikimedia Foundation
11/14/2019	Monique Appleton 38 Randolph Road Chestnut Hill, MA 02467	100	
11/6/2019	Stephanie Bruce 185 Rawson Rd #3 Brookline, MA 02445	250	Attorney Ropes & Gray LLP
11/6/2019	Committee to Elect Ben Franco 275 Cypress St Brookline, MA 02445	100	
11/9/2019	Committee to Elect Heather Hamilton 20 Henry St Brookline, MA 02445	150	
11/21/2019	Committee to Elect Heather Hamilton 20 Henry St Brookline, MA 02445	100	
11/9/2019	Committee to Elect Tommy Vitolo 87 Ivy St Brookline, MA 02446-4004	250	
10/30/2019	John Doggett 8 Penniman Road Brookline, MA 02445	100	
11/18/2019	Yukiko Egozy 34 Manchester Rd Brookline, MA 02446	250	Music teacher Self-employed
10/31/2019	Steven Ehrenberg 25 Stearns Rd Brookline, MA 02446	100	
11/2/2019	Raul Fernandez 5 Winchester Street, Apt 303 Brookline, MA 02446	100	
Line 9: Total Receipts over \$50 (or listed above)			Subtotal this page: \$1,925
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

← Enter on page 1, line 2

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

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
11/7/2019	Emine Fetvaci 1600 Beacon Street, Apt 706 Brookline, MA 02446	100	
11/13/2019	Andrew Fischer 21 Bartlett Crescent Brookline, MA 02446	100	
11/20/2019	Jane M Flanagan 854 Hammond St Chestnut Hill, MA 02467	125	
9/15/2019	David Gacloch 7 Fairway Road Chestnut Hill, MA 02467	515	Attorney McDermott Will & Emery LLP
11/9/2019	Eva Gellert 49 Summit Ave Apt 2 Brookline, MA 02446-2713	125	
11/9/2019	Nicholas B Gertler 49 Summit Ave Apt 2 Brookline, MA 02446-2713	125	
9/18/2019	Beth Gilligan 52 Kilsyth Road #2 Brookline, MA 02445	515	Director of Development Coolidge Corner Theatre
11/7/2019	Judith Z Gilligan 52 Farmingdale Road Wethersfield CT 06109	125	
9/30/2019	Jesse Gray 8 Griggs Terrace Brookline, MA 02446	500	Biologist Harvard University
9/11/2019	Evan R. Guggenheim 1487 Beacon St Apt #1 Brookline, MA 02446	100	
11/10/2019	Jocelyn Guggenheim 1487 Beacon St #1 Brookline, MA 02446	500	Nurse Practitioner South Boston Community Health Center
11/12/2019	Barbara Gutman 629 Hammond St W210 Chestnut Hill, MA 02467	100	
11/12/2019	Andrew Halpert 207 Mason Terrace #1 Brookline, MA 02446	54	Executive Reprieve Cardiovascular

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

Subtotal this page: \$2,984

← Enter on page 1, line 2

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

SCHEDULE A: RECEIPTS

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
11/6/2019	Benjamin B Kelley 185 Rawson Rd #3 Brookline, MA 02445	250	Business owner Self-employed
10/30/2019	Jennifer Kritz 765 Washington St Brookline, MA 02446	100	
11/9/2019	Sean Leckey 48 Marshal Street, Unit A Brookline, MA 02446	150	
10/2/2019	Donald Leka 140 Sewall Avenue Apt A Brookline, MA 02446	100	Retired
11/8/2019	Donald Leka 140 Sewall Avenue Apt A Brookline, MA 02446	100	Retired
9/16/2019	Robert Lepson 36 Thorndike Street Brookline, MA 02446	100	
9/14/2019	David Lescohier 50 Winchester St #103 Brookline, MA 02446	200	Retired
11/9/2019	David Lescohier 50 Winchester St #103 Brookline, MA 02446	100	Retired
9/16/2019	Nicole Lipson 65 Griggs Road Brookline, MA 02446	125	
9/16/2019	Paul Lipson 65 Griggs Road Brookline, MA 02446	125	
9/14/2019	Andreas Liu 61 Griggs Rd Brookline, MA 02446-4701	500	Scientist Children's Hospital Boston
9/11/2019	Alexander J. Loscalzo 1601 Beacon St Apt #203 Brookline, MA 02446	100	Research Assistant Brigham & Women's Hospital
Line 9: Total Receipts over \$50 (or listed above)			Subtotal this page: \$1,950
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

← Enter on page 1, line 2

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

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/14/2019	Alexander J. Loscalzo 1601 Beacon St Apt #203 Brookline, MA 02446	100	Research Assistant Brigham & Women's Hospital
9/17/2019	Anita B Loscalzo 16 Ledgewood Drive Dover, MA 02030	100	
9/11/2019	Kimberly E. Loscalzo 1601 Beacon St Apt #203 Brookline, MA 02446	100	Nanny Self-employed
9/14/2019	Kimberly E. Loscalzo 1601 Beacon St Apt #203 Brookline, MA 02446	100	Nanny Self-employed
10/30/2019	Kimberly E. Loscalzo 1601 Beacon St Apt #203 Brookline, MA 02446	100	Nanny Self-employed
9/18/2019	Ashley Nicole McClelland 1404 Beacon St #3 Brookline, MA 02446	550	Editor Self
11/20/2019	Richard Nangle 854 Hammond St Chestnut Hill, MA 02467	125	
9/14/2019	Mariah Nobrega 33 Bowker St Brookline, MA 02445	500	Admin Northeastern University
9/12/2019	Mike Offner 137 Clinton Rd Brookline, MA 02145	515	Consulting HedgeLaunch LP
11/7/2019	Mike Offner 137 Clinton Rd Brookline, MA 02145	100	Consulting HedgeLaunch LP
11/12/2019	Mike Offner 137 Clinton Rd Brookline, MA 02145	100	Consulting HedgeLaunch LP
11/9/2019	David A Pearlman, Esq 25 Goddard Circle Brookline, MA 02445-7404	200	Attorney Self
9/14/2019	Fred Perry 8 Bowker St Brookline, MA 02445	500	Sales Boston Electronics
Line 9: Total Receipts over \$50 (or listed above)			<i>Subtotal this page: \$ 3,090</i>
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

← Enter on page 1, line 2

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

SCHEDULE 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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
11/2/2019	Christine Rossell 44 High St. Brookline, MA 02445	100	
9/16/2019	Daniel Saltzman 62 White Place Brookline, MA 02445	200	Lawyer Self
11/14/2019	Ezra Sanieoff 281 Eliot St Chestnut Hill, MA 02467	400	Letter sent 11/18/2019
11/9/2019	Barbara C Scotto 26 Crowninshield Rd Brookline, MA 02446-6762	200	Retired
11/6/2019	Nathan Shpritz 44 Payson Road Chestnut Hill, MA 02467	100	
9/18/2019	Alice Speck 1561 Beacon St #3 Brookline, MA 02446-4602	500	Not Employed
11/2/2019	John VanScoyoc 307 Reservoir Road Chestnut Hill, MA 02467	100	
11/9/2019	Thomas J Vitolo 153 University Rd Brookline, MA 02445	54	
11/10/2019	Paul Warren 71 Carlton St. Brookline, MA 02446-4002	200	Retired
Line 9: Total Receipts over \$50 (or listed above)	11,803	<i>Subtotal this page: \$1,854</i>	
Line 10: Total Receipts \$50 and under* (not listed above)	2,096		
Line 11: TOTAL RECEIPTS IN THE PERIOD	13,899	← Enter on page 1, line 2	

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

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/25/2019	Cambridge Offset	822 Eastern Ave Fall River, MA 02723	Lawn signs, post cards	1,517.22
11/12/2019	Connolly Printing	17b Gill St Woburn, MA 01801	Campaign buttons	239.06
11/12/2019	Hops N Scotch	1306 Beacon St Brookline, MA 02446	Campaign Kickoff	527.05
11/12/2019	Jennifer Fergus Creative	209 Sycamore Ridge Lane Holly Springs, NC 27540	Design: Logo/Palettes/Fonts, Mailer, Yard Sign	636.56
11/20/2019	Red Sun Press	94 Green St Boston, MA 02130	Mailer	4,960.80
11/9/2019	Sir Speedy	827 Boylston St Boston, MA 02116	Palm cards	412.25
Line 12: Total Expenditures over \$50 (or listed above)				8,292.94
Line 13: Total Expenditures \$50 and under* (not listed above)				258.20
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				8,551.14

* 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
11/20/2019	Cambridge Offset	822 Eastern Ave Fall River, MA 02723	Banner	137.95
11/22/2019	Cambridge Offset	822 Eastern Ave Fall River, MA 02723	Buttons	279.69
9/10/2019	Mariah Nobrega	33 Bowker St Brookline, MA 02445	Website and DB services	354.08
11/15/2019	Red Sun Press	94 Green St Boston, MA 02130	Palm Cards	451.56
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				1,223.28



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

RECEIVED
TOWN OF BROOKLINE
TOWN CLERK
Office of Campaign and Political Finance

11/18/19

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: ~~2019~~ NOV 26 A 11:38 Beginning Date: ~~11/05/19~~ Ending Date: 11/26/19

Type of Report: (Check one) 15-DAY PRECEDING ELECTION
 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
E-mail:
Phone # (optional):

4 ALL BROOKLINE
Committee Name
JOSEPH RANFT
Name of Committee Treasurer
48 SALISBURY ROAD
Committee Mailing Address
E-mail: JRANFT@GMAIL.COM
Phone # (optional):

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	0.00
Line 2: Total receipts this period (page 3, line 11)	\$ 3,865.00
Line 3: Subtotal (line 1 plus line 2)	\$ 3,865.00
Line 4: Total expenditures this period (page 5, line 14)	0.00
Line 5: Ending Balance (line 3 minus line 4)	\$ 3,865.00
Line 6: Total in-kind contributions this period (page 6)	\$ 51.00
Line 7: Total (all) outstanding liabilities (page 7)	\$ 0.00
Line 8: Name of bank(s) used:	ROCKLAND TRUST

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: 11/26/19

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)
 Candidate with 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 that are not otherwise disclosed in this report.
 Candidate without Committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including 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 candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: _____ (Candidate's signature) 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 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)
11/25	NANCY PRONOVOS 29 SALISBURY 740 WASHINGTON	1,000	RETIRED
11/25	AVA PENMAN 29 SALISBURY	250	SELF EMPLOYED PSYCHOLOGIST
11/25	CAROL SCHAFF 5 EVANS	500	RETIRED
11/25	MIRIAM HAVEN 90 SALISBURY	100	
11/25	ERA DEUTSCH 93 SALISBURY	100	
11/25	JUDITH PARADIS 26 SALISBURY	500	REALTOR, COMPASS
11/25	MARCIA LYNCH 110 YORK TERR	500	RETIRED
11/25	SHARON SLODKI 1768 BEALON #44	150	
11/25	JEANE WHITEHOUSE 36 EVANS ROAD	150	
11/25	GLAZYMA MARZYNSKI 736 WASHINGTON	100	
11/26	MARCIA LYNCH 110 YORK TERR	500	RETIRED
11/25	MAISE / 90 + 95	65	
Line 9: Total Receipts over \$50 (or listed above)		3,800	
Line 10: Total Receipts \$50 and under* (not listed above)		65	
Line 11: TOTAL RECEIPTS IN THE PERIOD		3,865	← 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.

