

Form CPF M 102: Campaign Finance Report ELECTION OFFICE Municipal Form

Office of Campaign and Political Finance

2014 JAN 21 P 5: 57

of massacrasetts	File with: City or Town Clerk or Election Commission				
Fill in Reporting Period dates: Beginning Date:	-1-20/4 Ending Date: 1-3/-2014				
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)	Committee Name				
Colle Citor @ large	Milagras Funez				
Office Sought and District	O Name of Committee Treasurer				
6-Bay State Rd Residential Address	Committee Mailing Address				
Telephone Number (optional):	Telephone Number (optional):				
SUMMARY BALANC	CE INFORMATION:				
Line 1: Ending Balance from previous report	\$ 192 00				
Line 2: Total receipts this period (page 3, line 11)	\$ 2500				
Line 3: Subtotal (line 1 plus line 2)	\$ 2170				
Line 4: Total expenditures this period (page 5, lin	ne 14) \$ 2700				
Line 5: Ending Balance (line 3 minus line 4)	\$ 2483				
Line 6: Total in-kind contributions this period (pa	ge 6)				
Line 7: Total (all) outstanding liabilities (page 7)	\$2483				
Line 8: Name of bank(s) used: Eastle	Bank				
Affidavit of Committee Treasurer:					
I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in kind finance activity of all persons acting under the authority or on behalf of this committee in	contributions and liabilities for this reporting period and represents the committee				
Signed under the penalties of perjury:	(Treasurer's signature) Date: \[\langle -21 - 14 \]				
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 activity of all persons acting under the authority or on hold of this committee is not	best of my knowledge and belief, a true and complete statement of all campaign finance				
and the state of t					
Candidate without Committee OR Candidate with independent activity filing se 1 certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of thi	best of my knowledge and belief, a true and complete statement of all campaign in kind contributions and liabilities for this reporting period and represents the				
Signed under the penalties of perjury:	(Candidate's signature) Date: $1 - 21 - 14$				
<pre>// ()</pre>					

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.)

Name and Residential Address Date Received (alphabetical listing required) Amount			Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
Q		Ø	X	
ØA			**	
ine 9: Total Receip	ots over \$50 (or listed above)			
ine 10: Total Recei	pts \$50 and under* (not listed above)			
ine 11: TOTAL R	ECEIPTS 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)

Name and Residential Address Date Received (alphabetical listing required) Amount (for contributions of \$200 or mo				
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
ϕ_1	^ X			
		1		
Line 9: Total Receipts over \$50 (or listed above)			 	
Line 10: Total Rece	ipts \$50 and under* (not listed above)			
Line 11: TOTAL R	ECEIPTS 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 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.)

eport all expenditures. Please include your committee name and a page number on each page.) To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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11	/			
		7		
y L		Line 12: Total Expenditures over \$50 (or listed above)		M
Line 13: To		Line 13: Total Expenditures \$50	and under* (not listed above)	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				W
Enter on page 1, line 4 -> Direct 4. TOTAL EXPENDITURES IN THE PERIOD				

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

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
1	N.			
Line 12: Ex		Line 12: Expenditures over \$50) (or listed above)	
Line 13: Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				

^{*} 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
1-15-14	North-Shore		Magazine	\$204
	Latino Business		ndel	
1-15-14	El Mundo Newspaper	Boston MN	News paper Add	\$275
1-20-14	TV- Add Orall Can Veronia	East Buston	TV-Add	50
1-20-14	Full-Color	Joy ST Lynn	Business Card	\$204
-				
		1-31-14	Current	733
		12-31-14	Premissos 5	1,750
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				2483 Page 7

Form CPF M 102-0: Campaign Finance Report Municipal Form Office of Campaign and Political Finance City or Town of: _ Please print or type all information, except signatures. Fill in dates: Month Day _2 Reporting Period Beginning: Ending: Type of Report: (Check One) 8th day preceding election 20th day of January ☐ 8th day preceding ☐ 30th day following election preliminary/primary (Town or Special) Pursuant to M.G.L., Chapter 55: 1. 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.

3. I certify that I do not have a political committee.

	I. SIGNATURE	II. RESIDENTIAL ADDRESS	III. OFFICE SOUGHT
DATE	Signed under the penalties of perjury	(Street and Number)	
1/2/14	Miguel Sthe	6-Bay State Rd	Courcilor clarge
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