



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

LYNN ELECTION OFFICE

File with: City or Town Clerk or Election Commission
2014 JAN 10 P 12:43

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

<input type="text" value="ARIANA MURRELL-ROSARIO"/> Candidate Full Name (if applicable)	<input type="text" value="CMTE TO ELECT ARIANA MURRELL-ROSARIO"/> Committee Name
<input type="text" value="CITY COUNCIL WARD 4"/> Office Sought and District	<input type="text" value="ANH NGUYEN"/> Name of Committee Treasurer
<input type="text" value="35 BALITMORE STREET, LYNN, MA 01902"/> Residential Address	<input type="text" value="35 BALTIMORE STREET, LYNN, MA 01902"/> 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	<input type="text" value="2.94"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="1,765.02"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="1,767.96"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="1,707.03"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="60.93"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text" value="190"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text" value="11,105"/>
Line 8: Name of bank(s) used:	<input type="text" value="BROTHERHOOD CREDIT UNION"/>

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 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)
Nov 4, 2013	PHIL ALVARADO 50 LYNNWAY, LYNN MA 01902	100	
Nov 4, 2013	CECIL JOHN PO BOX 320 LYNN, MA 01903	200	MECHANIC
11/22/2013	ARIANA MURRELL-ROSARIO 35 BALTIMORE ST LYNN MA 01902	1,050	
12/31/2013	BANK INTEREST	0.02	
Line 9: Total Receipts over \$50 (or listed above)		1,350.02	
Line 10: Total Receipts \$50 and under* (not listed above)		415	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,765.02	← 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
11/13/2013	ANGEL ADVERTISING	888 WESTERN AVENUE LYNN MA 01905	SIGNS	400
11/13/2013	ANGEL ADVERTISING	888 WESTERN AVENUE LYNN MA 01905	SIGNS	218
10/27/2013	TATIANAS RESTAURANT	70 MARKET STREET LYNN, MA 01902	STAFF DINNER	58.38
10/25/2013	USPS	WILLOW STREET LYNN MA 01902	MAILING	827.06
10/31/2013	YANKEE MEDIA	14 BORDER ST LYNN, MA	DJ FOR FUNDRAISER	90
Line 12: Total Expenditures over \$50 (or listed above)				1,593.44
Line 13: Total Expenditures \$50 and under* (not listed above)				113.59
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1,707.03

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
BAL FORWARD	ARIANA MURRELL-ROSARIO	35 BALTIMORE ST LYNN, MA 01902	LOAN BY CANDIDATE	10,055
11/4/2013	ARIANA MURRELL-ROSARIO	35 BALTIMORE ST LYNN, MA 01902	LOAN BY CANDIDATE	1,050
Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)			11,105