



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2016 JAN 20 A 11:38
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10-27-2015 Ending Date: 12-31-2015

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

Natasha Megie-Maddey
Candidate Full Name (if applicable)

Lynn School Committee
Office Sought and District

36 Beacon Hill Ave Lynn MA 01902
Residential Address

Telephone Number (optional): 617-755-3853

Committee to Elect Natasha Megie-Maddey
Committee Name

Steven Dwyer
Name of Committee Treasurer

36 Beacon Hill Ave Lynn MA 01902
Committee Mailing Address

Telephone Number (optional): 617-755-3853

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>1,471.95</u>
Line 2: Total receipts this period (page 3, line 11)	<u>2,000.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>3,471.95</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>1,749.15</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>1,722.80</u>
Line 6: Total in-kind contributions this period (page 6)	<u>593.11</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>Brotherhood Credit Union</u>

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

Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 1/18/16

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

Candidate with Committee and no activity independent of the committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 1/18/16

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)
Oct 28, 2015	Michael Bloomberg 17 E 79th St. New York NY 10075	1,000	Bloomberg LP, CEO
Oct 28, 2015	Liam Kerr 25 Plymouth Road Needham MA 02492	1,000	Democrats for Education Reform, MA Director
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		2,000	← 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
Nov 1, 2015	Nationbuilder Website	Nationbuilder.com	Campaign Management Website	99
Nov 3, 2015	RFO Sullivans	151 Central Ave. Lynn MA	Food for volunteers of election day	240.15
Nov 4, 2015	Switchboard Communications LLC	888 16th Street Washington DC, 2006	Get out the vote calls	104.48
Oct 30, 2015	Thriftco Speedi Print	26 Howley St. Peabody MA	Door hangers	633.12
Line 12: Total Expenditures over \$50 (or listed above)				1,076.75
Line 13: Total Expenditures \$50 and under* (not listed above)				672.4
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1,749.15

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)	0