Form CPF M 102: Campaign Finance Report
Municipal Form

Office of Campaign and Political Finance

Commonwealth of Massachusetts

LYNN ELECTION OFFICE

2017 OCT 30 A 10:09

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: September 4, 2017 Ending Date: October 30, 2017

Type of Report: (Check one)

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

Jared Nicholson	Nicholson for School Committee
Candidate Full Name (if applicable)	Committee Name
Lynn School Committee	Katherine Rushfirth
Office Sought and District	Name of Committee Treasurer
13 Oneida St Lynn, MA 01902	13 Oneida St Lynn, MA 01902
Residential Address	Committee Mailing Address
Telephone Number (optional): 6177806747	Telephone Number (optional): 6177806747

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	$5,842.97
Line 2: Total receipts this period (page 3, line 11)	$4,493.95
Line 3: Subtotal (line 1 plus line 2)	$10,336.92
Line 4: Total expenditures this period (page 5, line 14)	$9,030.79
Line 5: Ending Balance (line 3 minus line 4)	$1,306.13
Line 6: Total in-kind contributions this period (page 6)	$0
Line 7: Total (all) outstanding liabilities (page 7)	$0
Line 8: Name of bank(s) used:	Eastern 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: _____ (Treasurer's signature) Date: October 30, 2017

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: October 30, 2017

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)
	Please see addendum		

Line 9: Total Receipts over $50 (or listed above)	$3,918.95
Line 10: Total Receipts $50 and under* (not listed above)	$575.00
Line 11: TOTAL RECEIPTS IN THE PERIOD	$4,493.95 ← 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.

Date Received	Name and Residential Address (alphabetical listing required)			Amount	Occupation & Employer (for contributions of $200 or more)
9/28/2017	Calnan	Edward	17 Cherry Tree Ln Lynn, MA 01904	$ 50.00	
9/28/2017	Carrigan	James	41 Seaview Ave Marblehead, MA 01945	$ 200.00	Attorney, The Law Offices of James J. Carrigan
9/28/2017	Comeau	Bob	28 Dona Rd Lynn, MA 01904	$ 25.00	
10/9/2017	Deitch	Jakob	2828 Zuni St #417 Denver, CO 80211	$ 100.00	
9/28/2017	Dill	Tom	38 Mary Ellen Dr Lynn, MA 01904	$ 100.00	
9/28/2017	Dill	Dan	PO Bo 90 Nahant MA 01908	$ 100.00	
10/8/2017	Firestone	Michael	97 Prospect St Unit 4 Somerville, MA 02143	$ 100.00	
10/7/2017	Gaeta	Charles	132 Range Heights Rd Lynn, MA 01902	$ 50.00	
10/8/2017	Levi	Addar	1418 15th Street NW, Washington DC	$ 100.00	
10/8/2017	Levitz	Philip	3035 15th St NW, #404, Washington, DC 20009	$ 200.00	Attorney, Covington & Burling
10/10/2017	Matys	Katharine	384 Powder Mill Rd, Concord, MA 01742	$ 100.00	
9/28/2017	Mihos	John	48 Linton Rd Lynn, MA 01904	$ 50.00	
9/5/2017	Nicholson	Jared	13 Oneida St Lynn, MA 01902	$ 65.00	Attorney, Latham & Watkins
9/30/2017	Nicholson	Jared	13 Oneida St Lynn, MA 01902	$ 50.00	Attorney, Latham & Watkins
9/30/2017	Nicholson	Jared	13 Oneida St Lynn, MA 01902	$ 371.00	Attorney, Latham & Watkins
9/29/2017	Nicholson	Jared	13 Oneida St Lynn, MA 01902	1,319.09	Attorney, Latham & Watkins
9/26/2017	Nicholson	Jared	13 Oneida St Lynn, MA 01902	$ 2.00	Attorney, Latham & Watkins
9/22/2017	Nicholson	Jared	13 Oneida St Lynn, MA 01902	$ 35.00	Attorney, Latham & Watkins
9/19/2017	Nicholson	Jared	13 Oneida St Lynn, MA 01902	$ 6.99	Attorney, Latham & Watkins
9/16/2017	Nicholson	Jared	13 Oneida St Lynn, MA 01902	$ 25.04	Attorney, Latham & Watkins
9/13/2017	Nicholson	Jared	13 Oneida St Lynn, MA 01902	$ 25.02	Attorney, Latham & Watkins
10/18/2017	Nicholson	Jared	13 Oneida St Lynn, MA 01902	$ 17.00	Attorney, Latham & Watkins
10/11/2017	Nicholson	Jared	13 Oneida St Lynn, MA 01902	$ 3.00	Attorney, Latham & Watkins
9/22/2017	Nicholson	Jared	13 Oneida St Lynn, MA 01902	$ 24.81	Attorney, Latham & Watkins
10/16/2017	Poulos	Nic	2 Northside Piers, #26M, Brooklyn, NY, 11249, US	$ 100.00	Venture Capitalist, Bowery Capital
10/9/2017	Rudolph	Steven	349 High St., Newburyport, MA, 01950, US	$ 100.00	
9/28/2017	Rushfirth	Susan	48 Harvard Drive Sudbury, MA 01776	$ 500.00	Retired
9/28/2017	Smith	James	50 Congress Street Suite 420 Boston, MA 02109	$ 50.00	
9/28/2017	Vitali	Richard	60 Andrew Street Lynn, MA 01901	$ 50.00	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)

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	

← 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
	Please see addendum			

Line 12: Total Expenditures over $50 (or listed above)	$8,791.93
Line 13: Total Expenditures $50 and under* (not listed above)	$238.86
Line 14: TOTAL EXPENDITURES IN THE PERIOD	

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.

Nicholson For School Committee
2017 Pre-Election MA CPF 102
Schedule B: Expenditures Addendum

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/30/2017	April's Pub & Grill	41 Buffum St, Lynn, MA 01902	Food for supporters	$ 371.00
9/29/2017	Connolly Printing	17B Gill St Woburn, MA 01801	Campaign literature	1,319.09
10/25/2017	Connolly Printing	17B Gill St Woburn, MA 01801	Mailer	$ 6,466.84
10/25/2017	Independent Newspaper Group LLC	385 Broadway, Ste. 105. Revere, MA 02151	Ad	$ 120.00
9/30/2017	LVTAAA	11 Savoy St Lynn MA 01904	Event sponsorship	$ 100.00
9/5/2017	Lynn Classical Boosters	235 O'Callaghan Way Lynn, MA 01905	Ad	$ 65.00
10/25/2017	Money Mailer of Southern Essex Count	589 Exssex St #205 Lynn, MA 01901	Mailer	$ 350.00

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

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 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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value

Line 15: In-Kind Contributions over $50 (or listed above)	$0
Line 16: In-Kind Contributions $50 & under (not listed above)	$0
Line 17: TOTAL IN-KIND CONTRIBUTIONS	$0

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

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)** $0