



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF CAMBRIDGE  
ELECTION COMMISSION

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ELECTION COMMISSION

File with:

City or Town Clerk or Election Commission. Please print or type all information, except signatures.

2014 FEB 24

2014 FEB 10 A 10:54

**Fill in dates:**

Reporting Period Beginning Month 10 Date 19 Year 2013 Ending Month 12 Date 31 Year 2013

**Type of report: (Check one)**

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

John Holland

Full Name of Candidate (if applicable)

SCHOOL COMMITTEE

Office Sought and District

26 NORMANDY TERRACE CAMB

Residential Address

02138

Tel. No. (optional)

COMMITTEE TO ELECT JOHN HOLLAND

Committee Name

N/A

Name of Committee Treasurer

26 NORMANDY TERRACE CAMB MA

Committee Mailing Address

02138

Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report	\$ <u>5.65</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>1250.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>1255.65</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>1242.78</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>12.87</u>
Line 6: Total in-kind contributions this period (page 4)	\$ _____
Line 7: Total (all) outstanding liabilities (page 4)	\$ _____
Line 8: Name of bank(s) used	<u>EAST CAMBRIDGE SAVINGS BANK</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:

Treasurer's signature (in ink)

Date

**FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)**

**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 signature (in ink)

Date

[Handwritten Signature]

1/21/14

**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.

This page may be copied 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)
10/20/13	SHEILA BEEZO 480 GRANT ST. LEXINGTON MA 02420	100 00	
10/29/13	WALTER ELLIS PO BOX 937 HAARARA MA 01451	100 00	
10/29/13	MICHAEL & MARIA GOLDSTEIN 17 NORMANDY TERRACE CAMBRIDGE MA 02138	100 00	
10/20/13	DEBORAH LYNCH 20 SHIP AVE APT 15 MEDFORD MA 02155	50 00	
10/29/13	EDWARD HALLITT 110 OAK ST CAMBRIDGE MA 02144	50 00	
10/29/13	JAMES HOLLAND 44 RIVERSIDE TERR BILLERICA MA 01821	50 00	
10/29/13	PATRICK HOLLAND 79 COLONIAL DR TOWNSEND MA 01878	100 00	
10/29/13	JUDY MEMORY 25 ENDICOTT AVE SOMERVILLE MA	50 00	
10/29/13	KILEEN & LARRY MCLUGAS 68 GRANTON ST. ARLINGTON MA 02477	200 00	REALTOR - BRENOAN WOODMAN
10/29/13	JOHN NOLAN 34 SUNSET RD CAMBRIDGE MA 02138	100 00	
10/29/13	MAURIN O'CONNOR 227 ORCHARD ST WATERTOWN MA 02472	100 00	
10/29/13	DUSTY RUDOLPH 3 TAMAR DR MEDFORD MA 02155	50 00	
10/29/13	CHARLES REIFE 2175 MOSS AVE CAMBRIDGE MA 02140	100 00	
10/29/13	JAN TORRY 7 PARRELL ST. ARLINGTON MA 02477	50 00	
Line 9: Total receipts in excess of \$50 (or listed above)			
Line 10: Total receipts \$50 and under* (not listed above)		50 00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1250 00	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.

This page may be copied 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	
10/30/13	CONNOLLY PRINTING	179 GIL ST WOBURN MA	PRINTING	\$90	27
10/29/13	FRANZ STEALTHOME	1250 MASS CAMB MA	FUNDRAISON EVENT	148	36
Line 12: Expenditures over \$50				1,158	63
Line 13: Expenditures \$50 and under*				104	15
<b>Line 14: TOTAL EXPENDITURES</b>				1,262	78

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 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			<b>Line 17: Total In-kind</b>	

\* 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			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	