



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

CITY OF CAMBRIDGE
ELECTION COMMISSION

File with City or Town Clerk for Election Commission

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="Kathleen M. Kelly"/> Candidate Full Name (if applicable)	<input type="text" value="Committee to Elect Kathleen M. Kelly"/> Committee Name
<input type="text" value="Cambridge School Committee"/> Office Sought and District	<input type="text" value="Victoria Harris"/> Name of Committee Treasurer
<input type="text" value="17 Marie Avenue, #1, Cambridge, MA 02139"/> Residential Address	<input type="text" value="17 Marie Avenue, #1, Cambridge, MA 02139"/> 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="7,220.07"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="1,610"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="8,830.07"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="3,143.02"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="5,687.05"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text" value="0"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text" value="3,000"/>
Line 8: Name of bank(s) used:	<input type="text" value="Leader 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:

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)
	PLEASE SEE ATTACHED		
Line 9: Total Receipts over \$50 (or listed above)		1,610	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,610	← 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.

Campaign To Elect Kathleen M. Kelly		Schedule A: Receipts Report 10/17/15 - 12/31/15	
Date Received	Name	Residential Address	Amount
10/31/2015	Adams, Penelope	501 Huron Avenue, Camb. 02138	\$30.00
10/31/2015	Brown, Richard S.	14 Concord Avenue, Suite 203, Camb. 02138	\$150.00
10/31/2015	Cobb, John	40 Avon Hill Street, Camb. 02138	\$250.00 Retired
10/31/2015	Foreman, Shelagh A.	27 Stonewall Lane, Falmouth, 02540	\$50.00
10/31/2015	Gallant, Steve	49 Fenno Street, Camb. 02138	\$50.00
10/31/2015	Goldstein, Gary	160 Lake View Avenue, Camb. 02138	\$50.00
10/31/2015	Hill, Elizabeth	136 Richdale Ave., Camb. 02140	\$50.00
10/31/2015	Kasell, Walter	175 Richdale Avenue, Camb. 02140	\$50.00
10/31/2015	Matthews, Kelly	31 Jackson Street, Camb. 02140	\$100.00
10/31/2015	Mehrling, Mary Lou	136 Hancock Street, Camb. 02139	\$100.00
10/31/2015	Nat'l. Assoc. of Social Workers MA	14 Beacon Street, Suite 409, Boston 02108	\$150.00
10/31/2015	O'Sullivan, Shane	551 Franklin Street Apt. B, Camb. 02139	\$25.00
11/1/2015	Papazian, Alex	105 Norfolk Street, #3, Camb. 02139	\$25.00
10/31/2015	Rafferty, James	40 Larch Road, Camb. 02140	\$100.00
10/31/2015	Ratliff, John	218 Thorndike Street, Apt. 106, Camb. 02141	\$50.00
10/31/2015	Rush, Catherine	68 Foster Street, Camb. 02138	\$100.00
11/1/2015	Sanford, Wendy C.	175 Richdale Avenue, #320, Camb. 02140	\$50.00
10/31/2015	Wassel, Norma	175 Richdale Avenue, Unit 214, Camb. 02140	\$30.00
10/31/2015	Young, Monica	50 Highland Ave. Camb. 02139	\$200.00 Clincial Social Worker Camb. Health Alliance
Total Receipts over \$50 (or listed above)			\$1,610.00
Total Receipts \$50 and under (not listed above)			\$0.00
TOTAL RECEIPTS IN THIS PERIOD			\$1,610.00

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 ATTACHED			

Line 12: Total Expenditures over \$50 (or listed above)	3,143.02
Line 13: Total Expenditures \$50 and under* (not listed above)	0.00
Line 14: TOTAL EXPENDITURES IN THE PERIOD	3,143.02

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.

Campaign To Elect Kathleen M. Kelly				
Schedule B: Expenditures Report 10/17/15 -12/31/15				
Date Paid	To Whom Paid	Address	Purpose of Expenditure	Amount
10/31/2015	Act Blue	366 Summer Street, Somerville 02144	Transaction Fee	\$0.99
10/31/2015	Act Blue	366 Summer Street, Somerville 02144	Transaction Fee	\$1.98
10/31/2015	Act Blue	366 Summer Street, Somerville 02144	Transaction Fee	\$7.90
11/1/2015	Act Blue	366 Summer Street, Somerville 02144	Transaction Fee	\$2.97
10/25/2015	Connolly Printing	17 Gill Street, Woburn, 01801	Printing/postcards; postage; mailing	\$3,129.18
			Expenditures over \$50 (or listed above)	\$3,143.02
			Expenditures \$50 and under	\$0.00
			Total Expenditures this period	\$3,143.02

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
9/20/2013	Kathleen M. Kelly	17 Marie Avenue, #1, Cambridge, MA 02139	Loan to Campaign	3,000
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	3,000