# For CAMBRIDGE CATION COMMISSION

Form CPF M 102: Campaign Finance Report
Municipal Form

Office of Campaign and Political Finance

Commonwealth EC   Unit of Massachusetts   P 2: 52	File with: City or Town Clerk or Election Commission
Commonwealth 2 P 2: 52  Fill in Reporting Period dates: Beginning Date: Jan  Thurs of Reports (Check one)	11, 2015 Ending Date: Dec 31, 2015
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution
Mervan Osborne	Committee to Elect Mervan Osborne
Candidate Full Name (if applicable)	Committee Name
School Committee (Cambridge)	Peter Steinmetz
Office Sought and District	Name of Committee Treasurer
89 Fayerweather Street, Cambridge	89 Fayerweather, Cambridge  Committee Mailing Address
Residential Address	_
Telephone Number (optional): (617) 653-7569	Telephone Number (optional): (617) 943-5102
SUMMARY BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	535.72
Line 2: Total receipts this period (page 3, line 1)	1) 0
Line 3: Subtotal (line 1 plus line 2)	535.72
Line 4: Total expenditures this period (page 5, li	ine 14) 416.87
Line 5: Ending Balance (line 3 minus line 4)	118.85
Line 6: Total in-kind contributions this period (p	page 6) 0
Line 7: Total (all) outstanding liabilities (page 7	0
Line 8: Name of bank(s) used: Citizen Bank	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee is Signed under the penalties of perjury:	d contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature) Date: Jan 20, 2016
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 b	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 activity, of all persons acting under the authority or on behalf of this committee in a incurred any liabilities nor made any expenditures on my behalf during this reporting	the best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, and period.
Candidate without Committee OR Candidate with independent activity filing  1 certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the state of the sta	the best of my knowledge and belief, a true and complete statement of all campaign nts, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date: Jan 20, 2016

### **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)	
Date Received	(alphabetical listing required)	Amount	(101 CONTINUIONS OF \$200 OF MOTE)	
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ne 9: Total Recei	pts over \$50 (or listed above)	The section of the se		
ne 10: Total Rece	ipts \$50 and under* (not listed above)		•	
11, TOTAL D	RECEIPTS IN THE PERIOD	0 4	Enter on page 1, line 2	

<sup>\*</sup> 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

eport 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
Jan Dec.	Citizens Bank		Monthly Service Charge \$9.99 x	119.88
Jul 17, 2015	Dot5 Hosting		Website hosting fee	16.99
Sep 8, 2015	Facebook		Facebook Fee	20
Nov 25, 2015	Whole Foods	340 River Street, Cambridge	End of Committee Service Celebration	260
		Line 12: Total Expenditures over \$50 (or listed above)		416.8
	•		\$50 and under* (not listed above)	
	Futon on mage 1. Une A	→ Line 14: TOTAL EXPEND		416.

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 ahove.

#### 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
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10.00				
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	,			
		Line 15: In-Kind Contributions	over \$50 (or listed above)	·
	Line 16: In-Kind Contributions \$50 & under (not listed above)			
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	0

<sup>\*</sup> 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.

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## 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	
				File of Madistrian To Fire visited Visited Annual A	
	·				
		·			
	``				
	Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				