

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ommonwealth Massachusetts	File with: City or Town Clerk or Election Commission Finding Date: 10/26/2017
ill in Reporting Period dates: Beginning Date: 12/31	L/2016 Ending Date: 10/26/2017
ype of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	30 day after election year-end report dissolution
	Committee to Elect Elechi Kadete
Elechi Kadete Candidate Full Name (if applicable)	Committee Name
School Committee Office Sought and District	Name of Committee Treasurer
10 Laurel St. Cambridge, MA 02139 Residential Address	10 Plymouth St. Cambridge, MA 02141 Committee Mailing Address
E-mail:	E-mail:
Phone # (optional):	
SUMMARY BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	48.48
Line 2: Total receipts this period (page 3, line 1	
Line 3: Subtotal (line 1 plus line 2)	5,692.48
Line 4: Total expenditures this period (page 5,	2,856.99 2,835.49
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period	(page 6)
Line 7: Total (all) outstanding liabilities (page	7)
Line 8: Name of bank(s) used: Eastern Bank	
finance activity of all persons acting under the authority or on behalf of this committee of persons acting under the authority or on behalf of this committee of persons acting under the penalties of perjury:	best of my knowledge and belief, a true and complete statement of all campaign finance with contributions and liabilities for this reporting period and represents the campaign for the contributions and liabilities for this reporting period and represents the campaign for accordance with the requirements of M.G.L. c. 55. [Treasurer's signature] [Treasurer's signature]
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, activity, of all persons acting under the authority or on behalf of this committee incurred any liabilities nor made any expenditures on my behalf during this report of the committee incurred any liabilities nor made any expenditures on my behalf during this report of the committee.	to the best of my knowledge and belief, a true and complete statement of all campaign finate in accordance with the requirements of M.G.L. c. 55. I have not received any contribution porting period.
on G. Hate with independent activity fi	ing separate report to the best of my knowledge and belief, a true and complete statement of all campaign to the best of my knowledge and belief, a true and complete statement of all campaign to the best of my knowledge and belief, a true and complete statement of all campaign to the best of my knowledge and belief, a true and complete statement of all campaign to the best of my knowledge and belief, a true and complete statement of all campaign to the best of my knowledge and belief, a true and complete statement of all campaign to the best of my knowledge and belief, a true and complete statement of all campaign to the best of my knowledge and belief, a true and complete statement of all campaign to the best of my knowledge and belief, a true and complete statement of all campaign to the best of my knowledge and belief, a true and complete statement of all campaign to the best of my knowledge and belief, a true and complete statement of all campaign to the best of my knowledge and belief, a true and complete statement of all campaign to the best of my knowledge and belief to the best of the

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)
Sep 22, 2017	David Annecchiarico 20 Putnam Ave. Cambridge, MA 02139	1,000	Retired
Oct 10, 2017	Patrick Barrett 234 Broadway St. Cambridge, MA 02139	500	Owner, PW Realty
Oct 10, 2017	Abra Berkowitz 253 1/2 Broadway St. Cambridge, MA 02139	25	
Oct 5, 2017	Nathan S. Betts DBA 13 Dodge St. Cambridge, MA 02139	150	
Oct 10, 2017	Joseph Bruschi III 843 Massachusetts Ave. Cambridge, MA 02139	50	
Aug 30, 2017	Laura M. Cangemi 34 Bates Road #2 Cambridge, MA 02139	50	
Aug 30, 2017	Michael Cappaso 22 Main St. Woburn, MA 01801	50	
Sep 22, 2017	David Carlson 160 Putnam Ave Cambridge, MA 02139	200	Staff, Riverside Pizza & Seafood Inc.
Feb 17, 2017	Billy Castor 10 Plymouth St. Cambridge, MA 02141	40	
Sep 22, 2017	Colleen J.G. Clark 21 Williams St. Cambridge, MA 02139	50	
Sep 11, 2017	Dana Clarke 137 Putnam Ave. Cambridge, MA 02139	100	
Oct 10, 2017	Robert N. Dottin Jr. 20 Bayberry Road Canton, MA 02021	100	
Line 9: Total Rece	ipts over \$50 (or listed above)	2,050	
Line 10: Total Rece	sipts \$50 and under* (not listed above)	265	
Line 11: TOTAL I	RECEIPTS IN THE PERIOD	2,315	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Sep 11, 2017	Darieri Forte 299 Washinton St. Apt. 1 Cambridge, MA 02130	200	Retired
Oct 26, 2017	John St. George 348 Windsor St. Cambridge, MA 02141	100	
Oct 2, 2017	Christina Giacobbe 7 Van Norden St. Cambridge, MA 02140	50	
Oct 26, 2017	Apostolos Goulopoolos 1130 Massachusetts Ave. Cambridge, MA 02139	50	
Aug 17, 2017	Yonas Hailemariam 24 Hews St. #3 Cambridge, MA 02139	40	
Sep 11, 2017	Richard Harding 180 Windsor St. Cambridge, MA 02139	409	Director, Cambridge Health Alliance
Aug 21, 2017	Chemi Kadete 10 Laurel St. Cambridge, MA 02139	200	Secretary, State Street
Aug 23, 2017	Elechi Kadete 10 Laurel St. Cambridge, MA 02139	5	
Oct 23, 2017	Ian C. Kenny 34 Laurel Road Milton, MA 02186	100	
Aug 8, 2017	Jeanne Koopman 248 River St. Cambridge, MA 02139	. 25	
Aug 8, 2017	Paul Lowe 14 Chalk St. Cambridge, MA 02139	100	
Sep 11, 2017	Claude Nelson 73 Parker St. Newton, MA 02459	75	
Aug 17, 2017	Peter Petrillo 139 Magazine St. Cambridge, MA 02139	100	Consultant, MBTA
Line 9: Total Rece	ipts over \$50 (or listed above)	1,284	
Line 10: Total Rece	cipts \$50 and under* (not listed above)	170	
	RECEIPTS IN THE PERIOD	1,454	← 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 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 23, 2017	Peter Petrillo 139 Magazine St. Cambridge, MA 02139	100	Consultant, MBTA
Sep 11, 2017	Antoinette Preston 9 Plymouth St. Apt. 2 Cambridge, MA 02141	100	
Oct 17, 2017	Sarah C. Ruiz 9 Lee St. Cambridge, MA 02139	100	
Oct 23, 2017	Nancy Ryan 4 Ashburton Place Cambridge, MA 02139	75	
Oct 18, 2017	Jay Shetterly 140 Magazine St. Cambridge, MA 02139	50	
Sep 11, 2017	Carolyn Shipley 15 Laurel St. Cambridge, MA 02139	100	
Aug 30, 2017	Artis Spears 124 Western Ave Cambridge, MA 02139	100	
Aug 8, 2017	Jonathan Steinman 13 Fairmont Ave. Cambridge, MA 02139	100	
Aug 21, 2017	Clifford Turner 275 Grove St. Cambridge, MA 02138	1,000	Retired
Aug 8, 2017	Amada Velez 52-2 Lawn St. Cambridge, MA 02138	100	
Aug 17, 2017	Catherine Zusy 202 Hamilton St. Cambridge, MA 02139	50	
Line 9: Total Rece	ipts over \$50 (or listed above)	1,775	
Line 10; Total Rece	eipts \$50 and under* (not listed above)	100	
Line 11: TOTAL l	RECEIPTS IN THE PERIOD	1,875	← 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.)

* *	To Whom Paid	mittee name and a page number o	1 0 /	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Oct 2, 2017	Arams #2	345 Cambridge St. Cambridge, MA 02141	Food for Fund-raiser Event	76.51
Sep 29, 2017	Cambridgeside Galleria	100 Cambridgeside Place Cambridge, MA 02141	Cups/Plates for Fund-raiser Event	29.68
Sep 29, 2017	Cambridge Offset Printing	56 Creighton St. Cambridge, MA 02140	Signs & Pins	203.47
Oct 23, 2017	Cambridge Offset Printing	56 Creighton St. Cambridge, MA 02140	Signs & Pins	157.61
Oct 2, 2017	Charles River Boat	100 Cambridgeside Place Cambridge, MA 02141	Refreshments	49.6
Oct 10, 2017	Cheesecake Factory	100 Cambridgeside Place Cambridge, MA 02141	Campaign Meeting	210
Sep 7, 2017	cvs	100 Cambridgeside Place Cambridge, MA 02141	Envelopes	9,12
Feb 17, 2017	Eastern Bank	647 Massachusetts Ave. Cambridge, MA 02139	Mini-statement Fee	1
Oct 10, 2017	Facebook	1 Hacker Way Menio Park, CA 94025	Advertisements	25
Oct 16, 2017	Facebook	1 Hacker Way Menlo Park, CA 94025	Advertisements	50.01
Aug 28, 2017	Grenier Print Shop	3702 Washington St. Jamaica Plain, MA 02130	Handouts/Flyers	265.63
Sep 29, 2017	Grenier Print Shop	3702 Washington St. Jamaica Plain, MA 02130	Handouts/Flyers	265.63
Line 12: Total Expenditures over \$50 (or listed above)			1,228.86	
Line 13: Total Expenditures \$50 and under* (not listed above)			114.4	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	1,343.26

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/23/2017	Grenier Print Shop	3702 Washington St. Jamaica Plain, MA 02130	Handouts/Flyers	265.63
Oct 10, 2017	Journeyling Artists	7 Pembroke St. Somerville, MA 02145	Advertisement Setup	250
Aug 28, 2017	J&M Enterprises	155-D New Boston St. Waltham, MA 01801	Campaign Shirts	128
Oct 2, 2017	Martin Brothers Liquor	1144 Cambridge St. Cambridge, MA 02139	Refreshments for Fund-raiser Event	77.58
Sep 27, 2017	NAACP	300 MLK Jr. Blvd. Roxbury, MA 02119	Networking Event	151.68
Sep 14, 2017	Riverside	305 River St. Cambridge, MA 02139	Food for Campaign Launch	100
Oct 2, 2017	Sav Mor Liquor	15 McGrath Highway Somerville, MA 02143	Refreshments for Fund-raiser Event	60.82
Sep 11, 2017	Smokeshop BBQ	25 Hampshire St. Cambridge, MA 02139	Campaign Meeting	229
Aug 23, 2017	Stripe	185 Berry St. Suite 550 San Francisco, CA 94107	Transfer Fee	0.45
Aug 30, 2017	Stripe	185 Berry St. Suite 550 San Francisco, CA 94107	Transfer Fee	1.75
Sep 11, 2017	Stripe	185 Berry St. Suite 550 San Francisco, CA 94107	Transfer Fee	2.48
Oct 17, 2017	Stripe	185 Berry St. Suite 550 San Francisco, CA 94107	Transfer Fee	3.2
Oct 18, 2017	Stripe	185 Berry St. Suite 550 San Francisco, CA 94107	Transfer Fee	1.75
		Line 12: Expenditures over \$	550 (or listed above)	1,262.71
		Line 13: Expenditures \$50 an	nd under* (not listed above)	9.63
	Enter on page 1, line 4 →	Line 14: TOTAL EXPEND	ITURES IN THE PERIOD	1,272.34

^{*} 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 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
	(alphabettal listing)		Turpose of Expenditure	Amount
Oct 19, 2017	Sylvanie George	40 River St. Cambridge, MA 02139	Campaign Materials	200
Oct 2, 2017	S&S Restaurant Deli	1334 Cambridge St. Cambridge, MA 02139	Food for Fund-raiser Event	41.39
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	200
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	41.39
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	241.39

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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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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		Line 15: In-Kind Contributions over \$50 (or listed above) 0		
		Line 16: In-Kind Contributions \$50 & under (not listed above) 0		
	Enter on page 1, line $6 \rightarrow$	Dine 17: TOTAL IN-KIND CONTRIBUTIONS 0		

^{*} 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
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	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	DING LIABILITIES (ALL)	0