

Form CPF M 102: Campaign Finance Report

Municipal Form

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Office of Campaign and Political Finance

of Massachusetts	2019 JAN 22 PM 2: 36 File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: Januar	y 1, 2018 Ending Date: December 31), 2018, MERIDGE ELECTIVE COMMISSION
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day after election ⊠ year-end report ☐ dissolution
Emily Dexter Candidate Full Name (if applicable) Cambridge School Committee Office Sought and District	Committee to Elect Emily Dexter Committee Name Armond Cohen Name of Committee Treasurer
9 Fenno St., Cambridge, MA 02138 Residential Address B-mail: emilydextersc@gmail.com	9 Fenno St., Cambridge, MA 02138 Committee Mailing Address E-mail: armond@catf.us
Phone # (optional): 617-460-1597	Phone # (optional): 617-680-0341
SUMMARY BALANCE	E INFORMATION:
Line 1: Ending Balance from previous report	\$151.74
Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2)	194,24 8 EPC > \$151.74
Line 4: Total expenditures this period (page 5, line	14) \$348.00
Line 5: Ending Balance (line 3 minus line 4)	O AMERE PO
Line 6: Total in-kind contributions this period (page	
Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used: East Cambridge Savin	\$4851.64 gs Bank
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind confinance activity of all persons acting under the authority of on behalf of this committee in the Signed under the penalties of perjury:	ntributions and liabilities for this reporting period and represents the campaign coordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 1/22/2019
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box of 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 beactivity, of all persons acting under the authority or on behalf of this committee in accommodate in activity and liabilities nor made any expenditures on my behalf during this reporting persons.	est of my knowledge and belief, a true and complete statement of all campaign finance rdance with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee OR Candidate with independent activity filing sepa I certify that I have examined this report including attached schedules and it is, to the befinance activity, including contributions, loans, receipts, expenditures, disbursements, is campaign finance activity of all persons acting under the authority or on behalf of this contributions.	est of my knowledge and belief, a true and complete statement of all campaign n-kind contributions and liabilities for this reporting period and represents the
Signed under the penaltics of perjury:	(Candidate's signature) Date: 1/22/2019

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)
1/31/2018	Emily Dexter 9 Fenno St.	196.24	School Committee menden
		Control of Marketine Control of C	
Line 9: Total Recei	pts over \$50 (or listed above)	0	
Line 10: Total Rece	ipts \$50 and under* (not listed above)	0	
	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
	NationBuilder (website)	520 South Grand Ave. 2nd Floor #200	Monthly fee (\$29/month) to maintain website	
L/2018-12/2018		Los Angeles, CA 90071	maintain website	\$348.0
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	The state of the s			
Anna Anna Anna Anna Anna Anna Anna Anna				
		Line 12: Total Expenditures over	er \$50 (or listed above)	\$348.0
	·	Line 13: Total Expenditures \$50		PARTICLE AND STREET
		Line 14: TOTAL EXPENDIT		\$348.0

^{*} 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 6 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
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	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
2015	Emily Dexter	9 Fenno St. Cambridge, MA 02138	Loan from candidate to cover expenses not covered by receipts	\$4655.38
12/31/2018	Emily Dexter	9 Fenno St. Cambridge, MA 02138	Loan from candidate to cover website expenses not covered by campaign balance	\$196.26
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				OLIM NON CONTROL OF
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The second secon	Enter on page 1 line 7 ->	Line 18: TOTAL OUTSTAN	DING LIARU ITIES (ALT)	\$4851.64