

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

			File with: City or Town Clea	k or Election Commission
Fill in Reporting Period dates:	Beginning Date:	Ending I	Date:	
Type of Report: (Check one)				
8th day preceding preliminary	8th day preceding election	30 day after election	year-end report	dissolution
Candidate Full Name	(if applicable)		Committee Name	
Office Sought ar	d District	Na	me of Committee Treasurer	
Residential A			ommittee Mailing Address	
E-mail: ibrahimimariam2@gmail.o	om	-	herry@yahoo.com	
Phone # (optional):		Phone # (optional):		
	SUMMARY BALAN	CE INFORMATION:		
Line 1: Ending Bal	ance from previous report			
Line 2: Total receip	ots this period (page 3, line 11	1)		
Line 3: Subtotal (li	ne 1 plus line 2)			
Line 4: Total exper	nditures this period (page 5, li	ne 14)		
Line 5: Ending Bal	ance (line 3 minus line 4)			
Line 6: Total in-kir	nd contributions this period (p	page 6)		
Line 7: Total (all) o	outstanding liabilities (page 7))		
Line 8: Name of ba	nk(s) used:			
Affidavit of Committee Treasurer: I certify that I have examined this report includi activity, including all contributions, loans, recei finance activity of all persons acting under the a Signed under the penalties of perjury:	pts, expenditures, disbursements, in-kind	d contributions and liabilities for thin accordance with the requirements	s reporting period and represe of M.G.L. c. 55.	
FOR CANDIDATE FILINGS ONL	Y: Affidavit of Candidate: (check 1 l	oox only)		
Candidate with Committee I certify that I have examined this report in activity, of all persons acting under the autineurred any liabilities nor made any expension. Candidate without Committee	hority or on behalf of this committee in a	accordance with the requirements of	f M.G.L. c. 55. I have not rec	
I certify that I have examined this report in finance activity, including contributions, lo campaign finance activity of all persons activity	ans, receipts, expenditures, disbursemen	ts, in-kind contributions and liabilit	ties for this reporting period are requirements of M.G.L. c. 5	nd represents the
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.)

	Name and Residential Address	Occupation & Employer		
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
1				
			J [
			1	
			J L	
ine 9: Total Recei	pts over \$50 (or listed above)			
ina 10. Tatal Day	into \$50 and undow* (not lists delicated		1	
ine 10: 10tal Kece	ipts \$50 and under* (not listed above)			
ine 11: TOTAL F	RECEIPTS IN THE PERIOD		☐ Enter on page 1, line 2	
		0 1: 10 1	ld include only those receipts not itemized above	

^{*} 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)
Date Received	(aiphabeteal fisting required)	Amount	(101 Contributions of \$200 of more)
Line 9: Total Rece	ipts over \$50 (or listed above)		
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL I	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
		2 0 Line 10 shou	Id include only those receipts not itemized above

^{*} 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				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	I	Line 12: Total Expenditures	over \$50 (or listed above)	
		10 70 170 17		
	I	Line 13: Total Expenditures \$	350 and under* (not listed above)	
	Enter on page 1, line $4 \rightarrow 1$			

^{*} 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 (alphabetical listing) Address Purpose of Expenditure Amount Amount	To Whom Paid					
Line 12: Expenditures over \$50 (or listed above) Line 13: Expenditures \$50 and under* (not listed above)	Date Paid		Address	Purpose of Expenditure	Amount	
Line 13: Expenditures \$50 and under* (not listed above)						
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Line 13: Expenditures \$50 and under* (not listed above)						
Line 13: Expenditures \$50 and under* (not listed above)			Line 12: Expenditures over \$50) (or listed above)		
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD						
		Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD		

^{*} 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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
-		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 $6 \rightarrow$	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	

^{*} 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
	Enter on maga 1 ling 7	Line 18: TOTAL OUTSTANI	NNC I IARII ITIFS (AI I)	