

Form CPF M 102: Campaign Finance Report

Municipal Form

LYNN ELECTION OFFICE

Office of Campaign and Political Finance

2012 JAN 12 P 12: 10

of Hissacondocts		File w	ith: City or Town Cler	k or Election Commission
Fill in Reporting Period dates: Beginning Date:	11/01/2011	Ending Date:	12/31/2011	
Type of Report: (Check one)				
8th day preceding preliminary 8th day preceding elec	tion 30 d	ay after election 🗵	year-end report	dissolution
CEFERINO ROSA	СОМ	MITTEE TO ELECT CEFE	RINO ROSA	
Candidate Full Name (if applicable)		Con	mmittee Name	1
WARD 4 LYNN CITY COUNCILOR	ARIA	NA MURRELL		
Office Sought and District		Name of	Committee Treasurer	
42 JOYCE STREET UNIT E LYNN MA 01902	175 l	EWIS STREET LYNN MA	01902	
Residential Address		Committ	tee Mailing Address	
Telephone Number (optional): (781) 244-5775	Telepho	one Number (optional):	(781) 599	9-4110
SUMMARY BAI	LANCE INF	ORMATION:		
Line 1: Ending Balance from previous repo	ort		365.1	14
Line 2: Total receipts this period (page 3, li	ine 11)		22	25
Line 3: Subtotal (line 1 plus line 2)			590.1	14
Line 4: Total expenditures this period (page	e 5, line 14)		487.6	57
Line 5: Ending Balance (line 3 minus line 4	4)		102.4	47
Line 6: Total in-kind contributions this peri	Line 6: Total in-kind contributions this period (page 6) 712			12
Line 7: Total (all) outstanding liabilities (pa	age 7) 2,075			75
Line 8: Name of bank(s) used: BROTHERHOOD CREDIT UNION				
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is no activity, including all contributions, loans, receipts, expenditures, disbursements, finance activity of all persons acting under the authority or on behalf of this committee under the penalties of perjure: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (che Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it activity, of all persons acting under the authority or on behalf of this commit incurred any liabilities nor made any expenditures on my behalf during this recardidate without Committee OR Candidate with independent activity. I certify that I have examined this report including attached schedules and it finance activity, including contributions, loans, receipts, expenditures, disbur campaign finance activity of all persons acting under the authority or on behalf or on behalf of this committee.	neck 1 box only) ee is, to the best of my ttee in accordance w reporting period. filing separate rep is, to the best of my tree in accordance w reporting period.	knowledge and belief, a true ith the requirements of M.G.L. knowledge and belief, a true ith the requirements of M.G.L. knowledge and belief, a true ith the requirements of M.G.L. knowledge and belief, a true ith true i	and complete statementhis reporting period and represe G.L. c. 55. ture) Date: C	ents the campaign 01/11/2012 Int of all campaign finance eived any contributions, and of all campaign and represents the
Signed under the penalties of perjury:		(Candidate's signa	ature) Date: 0	01/11/2012

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)	
11/04/2012	Alberto and Bertha Calvo 59 Wilde Road, Newton, MA 02468	200	Sales, Self employed	
Line 9: Total Recei	pts over \$50 (or listed above)	200		
Line 10: Total Rece	ipts \$50 and under* (not listed above)	25		
	RECEIPTS IN THE PERIOD receipts of \$50 and under, include them in line	L	← 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				
11/04/2011	Date Paid	•	Address	Purpose of Expenditure	Amount
			888 Western Avenue Lynn, Ma 01905		350
Line 12: Total Expenditures over \$50 (or listed above)					
Line 12: Total Expenditures over \$50 (or listed above)					
Line 12: Total Expenditures over \$50 (or listed above)					
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Line 12: Total Expenditures over \$50 (or listed above)			Line 12: Total Face of the second state of the	von \$50 (on lists de les co	
Line 13: Total Expenditures \$50 and under* (not listed above)					137.67
		Enter on page 1, line 4 →			487.67

^{*} 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
11/02/2011	Pablo Vargas	38 Forest Street Peabody, MA 01960	Website and database	712
				·
		Line 15: In-Kind Contributions over \$50 (or listed above)		712
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	→ Line 17: TOTAL IN-KIND CONTRIBUTIONS		

^{*} 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
08/30/2011	CEFERINO ROSA	42 JOYCE STREET UNIT E LYNN, MA 01902	LOAN	1,615
10/04/2011	CEFERINO ROSA	42 JOYCE STREET UNIT E LYNN, MA 01902	LOAN	260
12/28/2011	CEFERINO ROSA	42 JOYCE STREET UNIT E LYNN, MA 01902	LOAN	200
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				