

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

			File with	Mi. 1000 0 0 1-1	
Fill in Reportin	ng Period dates: Beginning Date: 3-2	25-14	Ending Date:	14-30-14	Election Commis
Type of Report	: (Check one)				1
8th day preced	ling preliminary 28th day preceding election	30 day	after election ye	ar-end report	dissolution
Jenni Fe	er Parson	Can	00011 - 10 01		73
	Candidate Full Name (if applicable)	LCOIL	mutee to fle	(+ Uenni+er	Marson
Milford, M	A School Committee	10/01/	anie Weaver	nee ivame	
	Office Sought and District	IVICIO		mittee Treasurer	
4 DiAntor	no Dr. Milford				
	Residential Address	120	rantonio Dr.	Milford	
Telephone Number (op	tional): 508 473-3438			failing Address	
	008 113-3130	l'elephone l	Number (optional):		
	SUMMARY BALANCE	INFOR	RMATION:		$\exists$
Lin	ne 1: Ending Balance from previous report	*Annanie Additional	285.20		
Lin	e 2: Total receipts this period (page 3, line 11)	nonumer polynomia.	2200.00		
Lin	e 3: Subtotal (line 1 plus line 2)		2485.20		
Lin	e 4: Total expenditures this period (page 5, line 1	4)	2399.29		
Lin	e 5: Ending Balance (line 3 minus line 4)		85.91		
Lin	e 6: Total in-kind contributions this period (page	6)			
Line	e 7: Total (all) outstanding liabilities (page 7)	Section 1	- 2		
Line 8: Name of bank(s) used: Milford Federal Savings & Loan					
Affidavit of Committee	reasurer:				
activity, including all cont finance activity of all person	ried this report including attached schedules and it is, to the best of maributions, loans, receipts, expenditures, disbursements, in-kind contributions acting under the authority or on behalf of this committee in accord	ry knowledge ibutions and rdance with	e and belief, a true and complet liabilities for this reporting per the requirements of M.G.L. o. 5	e statement of all camp iod and represents the	paign finance campaign
Signed under the penaltic	es of perjury: Muleaues		(Treasurer's signature)	Date: 4- 2	16-14
FOR CANDIDATE	FILINGS ONLY: Affidavit of Candidate: (check 1 box only	y)			
activity, of all persons	mittee and no activity independent of the committee amined this report including attached schedules and it is, to the best of acting under the authority or on behalf of this committee in accordant nor made any expenditures on my behalf during this reporting period	of my knowl nce with the	ledge and belief, a true and con requirements of M.G.L. c. 55.	aplete statement of all a	campaign finance y contributions,
finance activity, include campaign finance activ	ommittee OR Candidate with independent activity filing separate amined this report including attached schedules and it is, to the best of the contributions, loans, receipts, expenditures, disbursements, in-king the persons acting under the authority or on behalf of this contributions.	of my knowle	ledge and belief, a true and com tions and liabilities for this repo cordance with the requirements	uplete statement of all conting period and represt of M.G.L. c. 55.	ampaign ents the
Signed under the penalties	of perjury: WWW. MOLACOW	1	(Candidate's signature)	Date: 4-7	1-11/

# 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)
7-22-14	Dennis Goldstein 1877 florence Ave 94618	\$500	Natural Resources Consultant, Corporate Director
3-25-14	Jennifer Parson 4 Di Antonia Dr Milford MH 01757	8 1700	Check written to self bourad because depos it had not
			cleared yet. Check was since re-entered into account
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		менения — — — — — — — — — — — — — — — — — — —	
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The second secon	The second secon	The additional desiration of the control of the con	
e 9: Total Receipts over			
	and under* (not listed above)		
e 11: TOTAL RECEIP	of \$50 and under, include them in line 9.	,200 +	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 report all evpenditures Plages includ.

report all expen	ditures. Please include your com	mittee name and a page number of	n each page.)	ges are required
Date Paid	To Whom Paid (alphabetical listing)	Address Purpose of Expenditure		Amount
3-24-14	Milford federal Savings Brink	246 Main St Milford, MH 01757	Bounced Check fee	30
4-24-14	Jennifer Parson	4 DiAntonio Dr Milford, MA 01757	Campaign expense Reimbursement	1,700
			Re-135 URd	
2-19-14	WMRC Radio	258 Main St. Milford, MAONS)	Rodio Advensement	367.20
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and definition of the state of		The state of the s		
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The state of the s		Prince of the control		
				The state of the s
	-	Line 12: Total Expenditures over		2097.20
	<u> </u>	Line 13: Total Expenditures \$50 a		302.09
If you have itemiz	1	Line 14: TOTAL EXPENDITU		2399.29

\* 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.

				T
Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
The state of the s				
	Line 15: In-Kind Contributions over \$50 (or listed above)			
		E		
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				$\emptyset$

<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
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		Control of the Contro	demonstrativity	
Lipinara				
value de la constanta de la co				
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	ING LIABILITIES (ALL)	d

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