

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED TOWN CLERK READING, MASS.

File with: City or Town Clerk or Election Commission 2603 HAR 31 A 10: 06

or Town Clerk or Election Commission Please print or type all in	eformation, except signatures.
Fill in dates: Reporting Period Beginning MOTUA 10 2	1003 Ending March 32 2003
Type of report: (Check one) ☐ 8th day preceding preliminary — 8th day preceding elections.	ion 30 day after election year-end report dissolution
	Reading Pride
Full Name of Candidate (if applicable)	Arry Coumoundures
Office Sought and District	24 Smith Are Realing MA
Residential Address	Committee Mailing Address
Tel No. (optional)	Tel No. (optional)
Line 1: Ending balance from pre Line 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period Line 5: Ending balance (line 3 minus Line 6: Total in-kind contributions Line 7: Total (all) outstanding liabil Line 8: Name of bank(s) used	(page 2, line 11) \$\frac{2898}{3898} \\ \text{.04}\$ eriod (page 3, line 14) \$\frac{1}{103} \\ \frac{24}{24}\$ this period (page 4) \$\frac{1}{399.09}\$
Affidevit of Committee Trunsurer: I certify that I have examined this report including attached schedules and it is, finance activity, including all contributions, loans, receipts, expanditures, disbut compaign finance activity of all persons acting under the authority or on behalf. Signed under the persons activity of all persons acting under the authority or on behalf.	
	ONLY: (CANDIDATE MUST SIGN BELOW)
Affidavit of Cambidates (check I has only) Condidate with Committee and no activity independent of the committee and it is finance activity, and a checkles and it is finance activity, of all persons acting under the authority or on behalf of this contributions, incurred any liabilities nor made any expenditures on my behalf. Candidate without Committee OR Candidate with independent activit I certify that I have examined this report including attached schedules and it is	tee I, to the best of my knowledge and belief, a true and complete statement of all campaign committee in accordance with the requirements of M.C.L. c. 55. I have not received any during this reporting period. It filling separate report I, to the best of my knowledge and belief, a true and complete statement of all campaign sements, in-kind contributions and liabilities for this reporting period and represents the for this committee in accordance with the requirements of M.G.L. c. 55.
Candidate signature (in ink)	Dete

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 flemize 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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

mumber on each page.

Date Received			ount	Occupation & Employer (for contributions of \$200 or more
3.21.03	19 Buckskin Drive Reading	1110	_	
3.20.03	Cerullo, Bruce 29 Persons St. Bealing	1,000	F	Retired
3.21.63	Chiappini , Michelle Webot 50 Locust St. Reading	100	-	
5.X.03	Commitée Robert 78 Hanson me Realing	250	-	Self-employed milkrnist
31.03	24 Smith Are Azading	64	66	
60.K.	Fitzgerald Susan 241e Woburn St Realing	150		
311.03	Haratunian, Harry 113 Hathaway Are Benery MA	100		
320.03	Lautman David Mary 124 Daic St Reading	100		
3.31.63	47 County ex leading	100		
30.63	Montgomery Bernany No Hamman Are Reading	LO		
×31.03	Thernén Kurt · Shuri 48 Grove St Reading	100.		
	·			
Line 9: T	otal receipts in excess of \$50 (or listed above)	2114	5	
Line 10: T	otal receipts \$50 and under* (not listed above)	784	-	
Line 11: T	TOTAL RECEIPTS IN THE PERIOD	2992	(a la	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 abovc. Page 2

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.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amo	unt
311.03	Alex Carr		readmiphile.org	15	_
3.21.03	Alex Carr Postmuster Reading	Haven St Gending MA	Orchang Gr Jenerado	945	48
3.77.83	Math Wilson	Summer St Bending MA	reimburement by Postage	142	76
				·	
					-
		Line 12:	Expenditures over \$50	1103	94
		Line 13:	Expenditures \$50 and under*		-
]	Enter on page 1, line 4	Line 14	TOTAL EXPENDITURES	1103	24

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 3

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.

Date Received	From Whom Received*		Description of Contribution	Value
3.14.03	Elaine Webb	309 fearl St Reading MA	Room rental fee for Kickoff Mfg	# 10
•				
		Line 15	In-kind over \$50	
		Line 16	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17	: Total In-kind	10-

^{*} 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.

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
3.17.03	Paula Perry	40 Beaver Bl Bending MA	mouling supplies	64.56
3.17.03	The Graphics Shop.	Audiny Ma	Printing Siyers	729.53
			•	
	Enter on page 1, line 7	Line 18: OUTSTANDIN	NG LIABILITIES (ALL)	1399.09

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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