



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED TOWN CLERK
BRAINTREE, MA

Commonwealth
of Massachusetts

File with: ~~City~~ ~~Town~~ ~~Clerk~~ or ~~Political~~ ~~Commission~~

Fill in Reporting Period dates: Beginning Date: Ending 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)

Office Sought and District

Residential Address

Telephone Number (optional):

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<input type="text" value="3040.63"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="4.62"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="3045.25"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="1852.72"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="1192.53"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text" value="0.00"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text" value="0.00"/>
Line 8: Name of bank(s) used:	<input type="text" value="South Shore Bank"/>

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Leslie K. Powers (Treasurer's signature) Date:

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

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 best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date:

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
	See attached.			
			Line 12: Total Expenditures over \$50 (or listed above)	1227.86
			Line 13: Total Expenditures \$50 and under* (not listed above)	624.86
			Line 14: TOTAL EXPENDITURES IN THE PERIOD	1852.72

Enter on page 1, line 4 →

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

Date	To Whom	Address	Purpose	Amount
4.10.18	Braintree Special Needs Recreation Program	128 Town St, Braintree, MA 02184	Road Race Sponsorship	\$100.00
4.4.18	Cardinal Cushing Centers	405 Washington St, Hanover, MA 0239	Boston Marathon Fundraiser Donation	\$100.00
8.28.18	Committee to Elect Tim Cruz	141 Aunt Lizzies Lane Marshfield MA 02050	Donation	\$50.00
4.16.18	Cops For Kids With Cancer	PO Box 415, Califon, NJ 07830	Boston Marathon Fundraiser Donation	\$77.55
7.18.18	GoDaddy	14455 North Hayden Road Suite 219, Scottsdale, AZ 85260	Website Service	\$140.68
7.18.18	GoDaddy	14455 North Hayden Road Suite 219, Scottsdale, AZ 85260	Website Service	\$62.53
3.20.18	GronkNation	10680 Treena St, Suite 550, San Diego, CA 92131	Road Race Sponsorship	\$100.00
12.5.18	Hollis School PTO	482 Washington St, Braintree, MA 02184	Road Race Sponsorship	\$250.00
5.24.18	Massachusetts Almanac	568 Washington St., Suite 22 - Wellesley, MA 02482	Subscription	\$106.20
4.19.18	MassGOP	85 Merrimac St, Ste 400, Boston, MA 02114	Convention Fee	\$95.00
8.8.18	New Balance Falmouth Road Race	P.O. Box 732, Falmouth, MA 02541-0732	Registration Fee	\$76.16
1.6.18	Southside Tavern	941 Washington St, Braintree, MA 02184	Volunteer meeting	\$69.74
				\$1,227.86

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
	N/A			
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				0.00

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
	N/A			
			Line 15: In-Kind Contributions over \$50 (or listed above)	0.00
			Line 16: In-Kind Contributions \$50 & under (not listed above)	0.00
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	0.00

* 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 E
Municipal Form
Disclosure of Assets Statement
Office of Campaign and Political Finance**

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

CPF ID# _____

This form should be filed by all candidates and committees with each year end and each dissolution report.

Committee Name: The Powers Committee Date of report: 1-21-19

All candidates and committees must fill in Part A or Part B.

Part A:

No assets* were acquired or disposed of by this candidate/committee during the period covered by this statement.

Part B:

Assets acquired: List all assets acquired since the committee last filed this statement. If this is the first Schedule E you have filed, list all assets.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value

Assets disposed of: List all assets sold, traded or transferred during the reporting period covered by this statement.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	Disposition Value Attach statement of how value is determined.

Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.

*An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.

Signed under the penalties of perjury:

Signed under the penalties of perjury:

[Signature] 1-21-19
Candidate signature Date

[Signature] 1/21/19
Treasurer signature Date

Attach additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.

