



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

REGISTRAR OF VOTERS

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2013 OCT 29 P F 06

CITY OF MEDFORD

Fill in dates:

Reporting Period Beginning

Month

Date

Year

2013

Ending

Month

Day

Year

10

26

2013

Type of report: (Check one)

8th day preceding preliminary

8th day preceding election

30 day after election

year-end report

dissolution

FREDERICK M. DELLO RUSSO JR

Full Name of Candidate (if applicable)

Medford City Council

Office Sought and District

357 MAIN ST Medford

Residential Address

MA 02155

Tel. No. (optional)

Committee to Elect Fred Dello Russo

Committee Name

Name of Committee Treasurer

SAME

Committee Mailing Address

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 7870.01

Line 2: Total receipts this period (page 2, line 11) \$ 4099.00

Line 3: Subtotal (line 1 plus line 2) \$ 11,969.01

Line 4: Total expenditures this period (page 3, line 14) \$ 5030.67

Line 5: Ending balance (line 3 minus line 4) \$ 6938.34

Line 6: Total in-kind contributions this period (page 4) \$ 0

Line 7: Total (all) outstanding liabilities (page 4) \$ 0

Line 8: Name of bank(s) used Brockline BANK (MA)

#### 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:

Treasurer's signature (in ink)

Date

### FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

#### 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:

Candidate signature (in ink)

Date

10/23/13

**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* | Residential Address | Description of Contribution | Value |
|---------------------------------|---------------------|---------------------|-----------------------------|-------|
|                                 |                     |                     |                             |       |
|                                 |                     |                     |                             |       |
|                                 |                     |                     |                             |       |
|                                 |                     |                     |                             |       |
| Line 15: In-kind over \$50      |                     |                     |                             |       |
| Line 16: In-kind \$50 and under |                     |                     |                             |       |
| Line 17: Total In-kind          |                     |                     |                             | 0     |

Enter on page 1, line 6

\* 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 |
|--|-------------|---------|---------|--------|
|  |             |         |         |        |
|  |             |         |         |        |
|  |             |         |         |        |
|  |             |         |         |        |
| Line 18: OUTSTANDING LIABILITIES (ALL) |             |         |         | 0      |

Enter on page 1, line 7

**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 number on each page.

| Date Paid | To Whom Paid<br>(alphabetical listing)       | Address                                    | Purpose of Expenditure        | Amount                                |         |
|-----------|--|--|-------------------------------|---------------------------------------|---------|
| 10/2      | MONTVALE PLAZA<br>Stonham, MA                | MONTVALE AVE<br>Stonham MA 0180            | Fund raising<br>other deposit | 500                                   | 00      |
| 10/16     | PIRO PRINTING                                | BLDG 2 2nd floor<br>Cavities bwp, MA 02189 | printing                      | 318                                   | 75      |
| 10/16     | HAGGERTY CO.<br>Arrow Cir<br>Woburn MA 01801 | →  | printing and<br>mailing       | 4007                                  | 92      |
| 10/17     | US POST OFFICE                               | FOREST ST<br>City                          | Stamps                        | 184                                   | -       |
| /         |  |  |                               |                                       |         |
|           |  |  |                               | Line 12: Expenditures over \$50       | 5010 07 |
|           |  |  |                               | Line 13: Expenditures \$50 and under* | 20 00   |
|           |  |  |                               | Line 14: TOTAL EXPENDITURES           | 5030 07 |

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.

