

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance



File with: City or Town Clerk or Election Commission 10/30/2022 12/08/2022 Fill in Reporting Period dates: **Beginning Date: Ending Date:** Type of Report: (Check one) 38th day preceding preliminary 8th day preceding election X 30 day after election year-end report dissolution Yes for the rink Candidate Full Name (if applicable) Committee Name Victoria Fici Name of Committee Treasurer Office Sought and District 30 Bow Road, Belmont MA 02478 Residential Address Committee Mailing Address voteyesforrink@gmail.com E-mail: E-mail: 617-993-3673 Phone # (optional): Phone # (optional): SUMMARY BALANCE INFORMATION: \$6,742.30 Line 1: Ending Balance from previous report 0 Line 2: Total receipts this period (page 3, line 11) \$6,742.30 Line 3: Subtotal (line 1 plus line 2) \$5240.92 Line 4: Total expenditures this period (page 5, line 14) \$1,501.38 Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 6) Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used: TD 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. _(Treasurer's signature) Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) **Candidate with 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 that are not otherwise disclosed in this report. **Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55. Date: (Candidate's signature) Signed under the penalties of perjury:

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	. THE LIMIT AND ADDRESS AND ADDRESS A	port all receipts. Please include your committee name and a page number on each page.) Name and Residential Address Occupation & Employer											
	(alphabetical listing required)	(for contributions of \$200 or more)											
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			Product to Continue to the Con										
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ine 9: Total Receir	ots over \$50 (or listed above)												
ine 10: Total Recei	pts \$50 and under* (not listed above)												
ine 11: TOTAL R	ECEIPTS IN THE PERIOD	0	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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ne 9: Total Recei	pts over \$50 (or listed above)		
	ipts \$50 and under* (not listed above)		
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	RECEIPTS IN THE PERIOD		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	mittee name and a page number on eac		
Date Paid	(alphabetical listing)	Address	Amount	
	see attached		Purpose of Expenditure	
				<u>Limina in la companya di managana di mana</u>
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		I 12. T-4 I E)50 (- 11.4-1.1)	
		Line 12: Total Expenditures over \$	oou (or listed above)	
		Line 13: Total Expenditures \$50 and	d under* (not listed above)	
		- Production of the state of th	(
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDITURI	ES IN THE PERIOD	
		include them in line 12 Line 13 should		<u> </u>

^{*} 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 4

SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid											
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount								
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				Production of the Control of the Con								
	L											
		Line 12: Expenditures over \$50	(or listed above)									
		Line 13: Expenditures \$50 and t	under* (not listed above)									
	Thursday 1 11 4 4	Line 14. TOTAL EVDENDIT	IIDEC IN THE DEDIAD									
	Enter on page 1, line $4 \rightarrow \frac{1}{1}$	Line 14: TOTAL EXPENDIT		L								

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

Amount	\$ 3,928.64	\$ 35.63	\$ 543.05	mpaig \$ 100.54	iign \$ 58.80	\$ 188.76	\$ 111.24	\$ 30.99	\$ 158.50	\$ 63.98						No.				\$ 5,220.13	/e) \$ 20.79	\$ 5,240.92
Purpose of Expenditure	9x6 7,581. Postcard Yes for Rink	Alcoholic beverages for Vote Yes Campaign Night	Vote yes Campaign Wrap up Party	Coffee, Hot choc Munchkins for Town Field Vote Yes Campaig	Coffee, Hot chocolate Munchkins Center Vote Yes Campaign	Web Advertising - Vote Yes for Rink	Web Advertising - Vote Yes for Rink	Internet service - scheduling volunteers for Vote Yes	Food, Drink for Campaign Night Vote Yes	2 bottles Wine for Campaign Night Vote Yes							e det per en la monte de la companya			Line 12: Total Expenditures over \$50 (or listed above)	Line 13: Total Expenditures \$50 and under (not listed above)	Enter on page 1, line 4 Line 14: TOTAL EXPENDITURES IN THE PERIOD
Address	178 Gill Street Woburn, MA 01801	87 Leonard St. Belmont, MA 02478	87 Bigelow Ave. Watertown MA 02472	353 Trapelo Road, Belmont MA 02478	353 Trapelo Road, Belmont MA 02478	100 Binney St. Cambridge, MA 02142	100 Binney St. Cambridge, MA 02142	13777 Ballantyne Corporate PI, Ste 500, Charlotte, North Carolina, 28277	535 Trapelo Road, Belmont MA 02478	448 Common Street Belmont MA 02478												Enter on page 1, line 4
Paid To Whom Paid	11/4/22 Connolly Printing	11/9/22 Craft Beer Cellar	11/14/22 Donahue's Bar and Grill	11/7/22 Dunkin donuts	11/7/22 Dunkin donuts	11/1/22 Facebook	12/1/22 Facebook	11/17/22 Signup Genius	11/9/22 Star Market	11/10/22 The Spirited Gourmet		ertad per egyelet engelskilletter egyelet som skrivet engelskillet engelskillet engelskillet engelskillet enge	entry for contrary to the contrary of the cont	NOTET TO A CONTROL	TOTAL OF THE PARTY					Partition in the partition of the partit		

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				
		Line 15: In-Kind Contributions	over \$50 (or listed above)					
		Line 16: In-Kind Contributions \$50 & under (not listed above)						
	Enter on page 1, line $6 \rightarrow$	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.

Page 6

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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		Line 18: TOTAL OUTSTANI		