

Form CPF M 102-0: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

Please print or type all information, except signatures. Fill in dates: Reporting Period Beginning Month Day Year Ending Type of Report: (Check One) 8th day preceding preliminary/primary 8th day preceding preliminary/primary Pursuant to M.G.L., Chapter 55: 1. I certify that I am a candidate for or hold Municipal Office. 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.	City or Town of: Hanvard
Reporting Period Beginning Type of Report: (Check One) 8th day preceding preliminary/primary 8th day preceding preliminary/primary Report: (Check One) 1	Please print or type all information, except signatures.
8th day preceding preliminary/primary 8th day preceding election (Town or Special) 20th day of January (Year-End Report) Pursuant to M.G.L., Chapter 55: 1. I certify that I am a candidate for or hold Municipal Office. 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.	Reporting Period Positioning Vear
preliminary/primary (Town or Special) 20th day of January (Year-End Report) Pursuant to M.G.L., Chapter 55: 1. I certify that I am a candidate for or hold Municipal Office. 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.	Type of Report: (Check One)
 I certify that I am a candidate for or hold Municipal Office. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence. 	preliminary/primary 20th day of January
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.	Pursuant to M.G.L., Chapter 55:
3. I certify that I do not have a political committee.	2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
3-30-	n don Litel	CEMETERY	213 STOW RA
	HENDY FITEK	COMMISION	7, 0,
	Kufwan de	14 Fairbondest-Harvad	Board of Selectmen
4-6-17	M2. C	12 Orchard Hill.	School Committee
4-11-17	Surtee	27 Ayer Rd	Cemeter Comm
()	(((Commonity Progradion
4-26-17	uggicinho	31 Tran Picke Way	Parks and Rec Com
4/27/17	Offing.	121 Ayer Rd	Library Trustee
1005117	5	267 Littohn Road	Parka Recumm



Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance MAR 29 PM 4: 05

File with: City or Town Clerk or Election Commission				
Fill in Reporting Period dates: Beginning Date:	11/201	Ending Date: 3/27	17	
Type of Report: (Check one)				
	P	_	- Maries (1)	
8th day preceding preliminary 8th day preceding election	30 day	after election year-end report	dissolution	
KARA MINAK Candidate Full Name (if applicable)	CUMN	1 to EXECT KARAMINAR. Committee Name	for Bos	
	1 1	Committee Name		
Office Sought and District	$- - \omega$	Name of Committee Treasure	r	
204 STILL RIVER ROAD, HARVARD	2	21 LITLETON ROAD, HA Committee Mailing Address	KU	
E-mail: Willewidenan @ smail. com	10.1	Committee Mailing Address		
Phone # (optional):	E-mail:			
Thone # (optional).	Phone # (c	optional):		
SUMMARY BALAN	CE INFO	RMATION:		
	CE INTO	RMATION.		
Line 1: Ending Balance from previous report		-0-		
Line 2: Total receipts this period (page 3, line 1)	1)	1030		
Line 3: Subtotal (line 1 plus line 2)		1030		
Line 4: Total expenditures this period (page 5, li	ine 14)	315		
Line 5: Ending Balance (line 3 minus line 4)		715		
Line 6: Total in-kind contributions this period (p	page 6)			
Line 7: Total (all) outstanding liabilities (page 7)			
Line 8: Name of bank(s) used: Middlesus	& 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: Creasurer's signature Date: 3/27/17				
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:		(Candidate's signature) Date	3/29/17	

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)
3/25	Stu Sklar	150	
	Welgenadale	We	
3/25	Chris Tracey	200	davaloper-seeb eneplayed
3/25	Lucy Wallace	110	
Line 9: Total Recei	pts over \$50 (or listed above)	460	
Line 10: Total Rece	ipts \$50 and under* (not listed above)	570	
	RECEIPTS IN THE PERIOD	1030	← 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	1.8.7	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
3/27117	Harvard Press	P.O. Bix 284 Harvard, MA 01457	ad	315.00
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	315. po
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	315.00

^{*} 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
1		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 → 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.

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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
				and the state of t
		Line 18: TOTAL OUTSTANI		

Page 1 of



Form CPF M 102: Campaign Finance Report **Municipal Form**

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission	
Fill in Reporting Period dates: Beginning Date:	1 1,2017 Ending Date: MATCh 17, 2017	
Type of Report: (Check one)		
8th day proceeding and the	30 day after election year-end report dissolution	
Scard of Selectman Harvey, Ma Scoard Giffee Sought and District Grant Gare Hours And Mag Residential Address Residential Address Phone # (april 1997)	Committee Name Alexandra Moussouris Name of Committee Treasurer SC Pas & Late Har JAST Ma Committee Mailing Address Smail: Acrossouris & Garail Com Phone # (optional):	
SUMMARY BALANCE	INFORMATION:	
Line 1: Ending Balance from previous report		
Line 2: Total receipts this period (page 3, line 11)	500.00	
Line 3: Subtotal (line 1 plus line 2)	500,00	
Line 4: Total expenditures this period (page 5, line 1	4) 0	
Line 5: Ending Balance (line 3 minus line 4)	500,00	
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: Bank o	t America	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of a activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind continuance activity of all persons acting under the authority of on behalf of this committee in accommittee the penalties of perjury:	ributions and habilities for this reporting period and represents the campaign ordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 3-27-17	
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box of	nly)	
andidate 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 activity, of all persons acting under the authority or on behalf of this committee in according to the activity of all persons acting under the authority or on behalf of this committee in according to the activity of	dance with the requirements of M.C.L. c. 55. I have not received any contributions	
Candidate without Committee OR Candidate with independent activity filing separ I certify that I have examined this report including attached schedules and it is, to the best finance activity, including contributions, loans, receipts, expenditures, disbursements, in campaign finance activity of all persons acting under the authority of carbehalf of this company.	st of my knowledge and belief, a true and complete statement of all campaign kind contributions and liabilities for this reporting period and represents the minutee in accordance with the requirements of M.G.L., c. 55.	
Signed under the penalties of perjury:	Candidate's signature) Date: 3-27-17	

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)
3-15-17	Professional fire Lithers of Massachusells (OFFM) 2 center Plaza # 4m Boston / MK 02 108	500.00	
	Boston, MK 02 108		
ine 9; Total Receip	ts over \$50 (or listed above)	Listed Aba	we
ine 10: Total Receip	ots \$50 and under* (not listed above)	0	
	ECEIPTS IN THE PERIOD	500,00	← Enter on page 1, line 2