

## 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 Commiss				
Fill in Reporting Period dates: Beginning Date: 1-1-2012 Ending Date: 1-1-2013				
Type of Report: (Check one)				
8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution				
John D. Leone Comm. to Elect. John D. Leone, Noderator				
Candidate Full Name (if applicable)  Committee Name				
Aaon Moderator-Arlington  Office Sought and District  Suzanne M. Lindner  Name of Committee Treasurer				
51 Iving St., Arl. MA. 02476  Residential Address  SI Iving St., Arl. Ma. 02476  Committee Mailing Address				
Telephone Number (optional): 781-641-3546  Telephone Number (optional): 781-641-3546				
SUMMARY BALANCE INFORMATION:				
Line 1: Ending Balance from previous report  1581.19				
Line 2: Total receipts this period (page 3, line 11)				
Line 3: Subtotal (line 1 plus line 2)  1608.45				
Line 4: Total expenditures this period (page 5, line 14)				
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: Leador Bank				
Affidavit of Committee Treasurer:  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 in including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign in ance 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)  Date: 1.17.2013				
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: 1-17-2013				

## **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	1	
Date Received	(alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	(aiphabetical listing required)	Amount	(for contributions of \$200 of more)
12.31.12	Interest Leader Bank	27.26	
8			
			,
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)  27.26			
Line 11: TOTAL RECEIPTS IN THE PERIOD 27.26			← Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.