Form CPF M 102: Campaign Finance Report OWN CLERK'S OFFICE RLINGTON, MA 02174

Municipal Form Office of Campaign and Political Finance

Commonwealth 2016 JAN 20 PM 2: 04

of Massachusetts	File with: City or Town Clerk or Election Commission		
State State Alle State & T. A. Salah State	1/15 Ending Date: 1/20/16		
Tune of Deposits (Check and)			
Type of Report: (Check one)			
8th day preceding preliminary 8th day preceding election	30 day after election		
Kirsi Allison-Ampe Candidate Full Name (if applicable)	Committee to Elect Kirsi Allison-Ampe		
	Committee Name		
School Committee Arlington Office Sought and District	Vesna Nasteva - Zaccheo Name of Committee Treasurer		
2 Governor Rd Arlington MA 02474	2 Governor Rd Arlington MA		
Residential Address	Committee Mailing Address		
Telephone Number (optional):	Telephone Number (optional):		
SUMMARY BALANCE	INFORMATION:		
Line 1: Ending Balance from previous report	602.59		
Line 2: Total receipts this period (page 3, line 11)	6		
Line 3: Subtotal (line 1 plus line 2)			
Line 4: Total expenditures this period (page 5, line 1	(4)		
Line 5: Ending Balance (line 3 minus line 4)	602.59		
Line 6: Total in-kind contributions this period (page	6) 0		
Line 7: Total (all) outstanding liabilities (page 7)	1000.00		
Line 8: Name of bank(s) used: Leader Ba	ank + paypal		
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind cont finance activity of all persons acting under the authority or on behalf of this committee in account of the second of the	tributions and liabilities for this reporting period and represents the campaign ordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date:		
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 bes activity, of all persons acting under the authority or on behalf of this committee in according incurred any liabilities nor made any expenditures on my behalf during this reporting per Candidate without Committee OR Candidate with independent activity filing separal certify that I have examined this report including attached schedules and it is, to the best finance activity, including contributions, loans, receipts, expenditures, disbursements, incampaign finance activity of all persons acting under the authority or on behalf of this contributions.	dance with the requirements of M.G.L. c. 55. I have not received any contributions, riod. ate report 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		
Signed under the penalties of perjury:	(Candidate's signature) Date: 1/19/16		

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
3/3/2010	Kirsi Allison-Ampe	2 Governor Rd Arlington MA	Loan for campaign	1000.00
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	ING LIABILITIES (ALL)	(000.00



Schedule E Municipal Form

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cal Finance

	Disclosure of Assets St Office of Campaign and Politic
Commonwealth of Massachusetts	

File with: City or Town Clerk or Election Commiss	ion		CPF ID#	
This form should be filed by	all candidates	and committees with each	vear end and each diss	olution report.
		t Kużn Allison.		•
All can	ididates and co	ommittees must fill in Pa	rt A <u>or</u> Part B.	
Part A:			*	
No assets* were acquired or dispo	osed of by this	candidate/committee duri	ng the period covered	by this statement.
Part B: <u>Assets acquired:</u> List all assets acquired: List all assets.	nired since the	committee last filed this	statement. If this is th	e first Schedule E you
Asset Include year, model or other identifying information, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value
		-		
Assets disposed of: List all assets sol	d, traded or tra	nsferred during the repor Disposition to:	ting period covered by t	Disposition Value
Include year, model or other identifying information, if applicable.	Acquired	Name and Address	of Disposition	Attach statement of how value is determined.
Assets acquired by a political committee mu of that committee. Assets may be disposed of				nd must remain the property
*An asset is defined as any one item that has a cost/value of \$1,000 or more at the time of		nore than one year, would be	depreciable in a normal bu	siness environment, and has
Signed under the penalties of perjury:		Sig	med under the penalties of p	perjury:
6 4 C/2 1/1º	7/16		Jerna N Zar	cho 1/19/16
Candidate signature Date		T.	easurer signature	Data

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