

## 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:	May 10, 2021 Ending Date: May 10, 2021		
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election	n 🔀 30 day after election 🔲 year-end report 🔲 dissolution		
Kelda Fontenot	Campaign to Elect Kelda Fontenot		
Candidate Full Name (if applicable)	Committee Name		
Arlington Housing Authority	Elizabeth Dray  Name of Committee Treasurer		
Office Sought and District	130 Jason St., Arlington, MA 02476		
43 Allen Stl, Apt 2-A, Arlington, MA 02474  Residential Address	Committee Mailing Address		
E-mail: keldafontenot@gmail.com	F-mail: elizabethdray7@gmail.com		
Phone # (optional):	Phone # (optional):		
Thome w (optional).			
SUMMARY BALA	NCE INFORMATION:		
	3533.18		
Line 1: Ending Balance from previous report			
Line 2: Total receipts this period (page 3, line			
Line 3: Subtotal (line 1 plus line 2)	4311.02		
Line 4: Total expenditures this period (page 5.	line 14) 4207.11		
Line 5: Ending Balance (line 3 minus line 4)	103.91		
Line 6: Total in-kind contributions this period	(page 6) 0.00		
Line 7: Total (all) outstanding liabilities (page	7) 0.00		
Line 8: Name of bank(s) used: Leader Bank			
activity, including all contributions, loans, receipts, expenditures, disbursements, in-ki finance activity of all persons acting under the appropriate of this committee Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check I Candidate with Committee I certify that I have examined this report including attached schedules and it is, to activity, of all persons acting under the authority or on behalf of this committee in incurred any liabilities nor made any expenditures on my behalf during this report.  Candidate without Committee  Locatify that I have examined this report including attached schedules and it is, to	(Treasurer's signature)  Date: 5.10.2  I box only)  to the best of my knowledge and belief, a true and complete statement of all campaign finance in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ring period that are not otherwise disclosed in this report.  The best of my knowledge and belief, a true and complete statement of all campaign tents, in-kind contributions and liabilities for this reporting period and represents the of this candidate in accordance with the requirements of M.G.L. c. 55.		
Signed under the penalties of perjury:	(Candidate's signature) Date: 5/10/21		

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 ir. Committees must keep detailed account. ir. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the supation and employer must be suparted the superior and employer must be superior to the sup

supation and employer must be reported for all persons who contribute \$200 or more in a calendar year. "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to

Git all receipts	ceipts" attachment is available to complete, Please include your committee name and a p Name and Residential Address	Amount	Occupation & Employer  (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	50.00	
29/21	Burngarner, Erln 8 Palmer St., Arlington, MA 02474	30.00	
o rainio.	o rainer out	200	Tutor
	Johnson, Claire		Self-Employed
/29/21	84 Wright St., Arlington, MA 02474		
		50.00	
3/29/21	Mraz, Sarah 66 Chandler St., Arlington, MA 02474		
		127.84	
120/21	Martyn, Lynette	127.04	
3/30/21	18 Eustis St., Arlington, MA 02476		
		<u> </u>	
	Culverhouse, Lynette	50.00	
3/31/21	24 Draper Ave., Arlington, MA 02474		
	Gruber, Rebecca	50.00	
3/31/21    Gruber, H	215 Pleasant St., Arilington, MA 02476		
	_		
		50.00	
3/31/21	Mostajo, Sandra 191 Park Ave., Arlington, MA 02476		11
		50.00	
3/31/21	Soneja, Rajeev 13 Mary St., Arlington, MA 02474		
		25.00	
4/1/21	Collins, Laurel 6 Munroe St., Woburn, MA 01891		
	ll b Fidinge St., Wooding Care		
L		50.0	
4/1/21	Steinitz, Rebecca 33 Cleveland St., Arlington, MA 02474	50.0	
	33 Cleveland St., Allington, PA 02-74		
4/7/21	McCabe, Susan	50.0	0
	22 Russell St., Arlington, MA 02474		
4/7/21	Mortimer, Susan	25.0	0
	271 Mass. Ave., Arlington, MA 02474		
Line 9: Total R	Leceipts over \$50 (or listed above)	777.	34
Line-10: Total-I	Receipts \$50 and under* (not-listed above)		
Line 11. TOT	I DECEMBE IN THE PERIOD	777.	
Line 11: 1017	AL RECEIPTS IN THE PERIOD		← 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.

# 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 ailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together.

"Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to n committee records, and reported on line 13.

your committee name and a page number on each page.)

	Expenditures" attachment is a ditures. Please include your con To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount 3532.46
Date Paid (alphabetical listing)    31/21   Connolly Printing   Co		178 Gill St Woburn, MA 01801	2nd Post Card Mailer	
			Kelda color flyers	573.75
2/21	Connolly Printing .	178 Gill St Woburn, MA 01801	Reida Color Hyers	
6/21	Elizabeth Dray	130 Jason St., Arlington, MA 02476	Reimbursement for yard sign metal stakes & Ktrio sheet protectors	100.90
and and an analysis of the second				
21-73 (1-1-2-1)				
	<u> </u>	Line 12: Total Expenditu	res over \$50 (or listed above)	4207.1
			es-\$50-and-under* (not-listed-above)	
	Enter on mage 1. Sing A.	Line 14: TOTAL EVER	NDITURES IN THE PERIOD	4207.1

enditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized bove.



### OFFICE OF THE TOWN CLERK TOWN OF ARLINGTON 730 MASSACHUSETTS AVENUE ARLINGTON, MA 02476

TELEPHONE (781) 316-3070

### CERTIFICATION OF TOWN CLERK

I hereby certify that the foregoing is a TRUE COPY from the records of the Town Clerk's Office, Arlington, Massachusetts and that an identical version was received by this office on May 10, 2021.

Attest:

Town Clerk

Date:

5/12/2021