

Form CPF M 102: Campaign Finance Report

Municipal Form Office of Campaign and Political Finance

Town Clerk's Office

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22 JAN 2024 9:39 AM

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 01/20/	Ending Date: 12/31/23
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution
Kirsi Allison-Ampe Candidate Full Name (if applicable) Arlington School Committee	Committee to Elect Kirsi Allison-Ampe Committee Name Vesna Zaccheo Name of Committee Treasurer
Office Sought and District	•
2 Governor Rd Arlington MA 02474 Residential Address	34 Hamilton St Somerville MA 02144 Committee Mailing Address
<u> </u>	E-mail: vesna.n.zaccheo@gmail.com
E-mail: kirsi@allisonampe.org	
Phone # (optional):	Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	87.10
Line 2: Total receipts this period (page 3, line 11)) 0
Line 3: Subtotal (line 1 plus line 2)	87.10
Line 4: Total expenditures this period (page 5, lin	ne 14) d
Line 5: Ending Balance (line 3 minus line 4)	87.10
Line 6: Total in-kind contributions this period (pa	age 6) d
Line 7: Total (all) outstanding liabilities (page 7)	400.0d
Line 8: Name of bank(s) used: Leader Bank, PayPal	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the bes activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be	ox only)
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in activity and incurred any liabilities nor made any expenditures on my behalf during this reporting	e best of my knowledge and belief, a true and complete statement of all campaign finance coordance with the requirements of M.G.L. c. 55. I have not received any contributions, g 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 finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	is, in-kind contributions and habitities for this reporting period and represents the his candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the negalties of periury:	(Candidate's signature)

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)
		I TAMOUNE	(for contributions of \$200 or more)
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in a O. Tal I B	050 (12) 13		
me 9: 1 otal Receipt	s over \$50 (or listed above)	Q	
ine 10: Total Receive	ts \$50 and under* (not listed above)		
——————————————————————————————————————	is \$50 and under. (not listed above)	<u> </u>	
ine 11: TOTAL RE	CEIPTS IN THE PERIOD	d	£ 77 /
f you have itemized re	4.		← Enter on page 1, line 2

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		,		
V				
,				
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	
		12. T-4-1 F	O and under* (not listed shove)	
		Line 13: Total Expenditures \$5		
	Enter on page 1 line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	

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

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	ı Value
				The state of the s
£		Line 15: In-Kind Contributions	over \$50 (or listed above)	q
	Line 16: In-Kind Contributions \$50 & under (not listed above)			
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	NTRIBUTIONS	q

^{*} 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
3/3/10	Kirsi Allison-Ampe	2 Governor Rd	oan for campaign	400.00
	Enter on page 1 line 7		 FANDING LIABILITIES (ALI	