

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

Commonwealth of Massachusetts	2019 JAN -7 PM 12: [1]
Fill in Reporting Period dates: Beginning Date:	File with: City or Town Clerk or Election Commission 2018 Ending Date: 2/31/2018
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
MICHARU D. AUFW Candidate Full Name (if applicable)	AUGN RUBETTOW COMMITTER TOWN AUGUS
15 Poph ST, SHULL MA 01970 Residential Address,	15 POPE ST SAMM ME 01970 Committee Mailing Address
E-maily teered from smitheram	E-mail: Mike O'ed lin 5 mike com
Phone # (optional): 978, 744, 6453	Phone # (optional): 918-744-6453
SUMMARY BALANCI	E INFORMATION:
Line 1: Ending Balance from previous report	100.00
Line 2: Total receipts this period (page 3, line 11)	Ø
Line 3: Subtotal (line 1 plus line 2)	100.00
Line 4: Total expenditures this period (page 5, line	14)
Line 5: Ending Balance (line 3 minus line 4)	100,00
Line 6: Total in-kind contributions this period (page	(6)
Line 7: Total (all) outstanding liabilities (page 7)	28 494,54
Line 8: Name of bank(s) used: SAUGM	FIVE
fildavit of Committee Treasurer: ertify that I have examined this report including attached schedules and it is, to the best of n ivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contrance activity of all persons acting under the authority or on behalf of this committee in accounted under the penalties of perjury:	ributions and liabilities for this reporting period and represents the compaign
DR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box on	
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 activity, of all persons acting under the authority or on behalf of this committee in accorda incurred any liabilities nor made any expenditures on my behalf during this reporting period	ince with the requirements of M.G.L. c. 55. I have not received any contributions
Candidate without Committee OR Candidate with independent activity filing separat 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-ke campaign finance activity of all persons acting under the authority of on behalf of this commended under the penalties of perjury:	of my knowledge and belief, a true and complete statement of all campaign

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
ne 9: Total Receipts ove	er \$50 (or listed above)		
ne 10: Total Receipts \$5	0 and under* (not listed above)	X	
ne 11: TOTAL RECEI	PTS IN THE PERIOD		Enter on page 1, line 2

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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.)

	ort all expenditures. Please include your committee name and a page number on each page.) To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
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		Line 12: Total Expenditures over	\$50 (or listed above)		
		Tine 10: max 1 m	. 4 1		
		Line 13: Total Expenditures \$50 a	nd under* (not listed above)		
	Enter on nece 1 line 4 a	Line 14: TOTAL EXPENDITUR	RESINTHE PERIOD	()	
	Enter on page 1, line 4 g	DIRE 14. TOTAL DATE BOTT OF	Com the region	/	

^{*} 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		10. P. W. Assi		
	-	Line 12: Expenditures over \$50 (or		
•	-	Line 13: Expenditures \$50 and unde		
vou have itemized.	1.0	ine 14: TOTAL EXPENDITURE		

^{*} 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	Value
	-			
		Line 15: In-Kind Contributions ov	er \$50 (or listed above)	
		Line 16: In-Kind Contributions \$50	& under (not listed above)	
	Enter on page 1, line 6 g	Line 17: TOTAL IN-KIND CON	TRIBUTIONS	

^{*} 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
0999	MICHABI ACIAN CANDIDAG	15 POPE ST' DALBM MA 01970	CANDIDATE	16,500,00
2003	ll	. 4	1	2994.54
2007	11		11	5000.00
2009		[[s/	4000.00
			. 14.34	
	Enter on page 1, line 7 g Lin	e 18: TOTAL OUTSTANDING	G LIABILITIES (ALL)	494.54