



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: **2015** Beginning Date: **08-17-15** Ending Date: **10-26-15**

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Heather Engman
Candidate Full Name (if applicable)
Town Council, Precinct 4
Office Sought and District
208 Grovers Ave, Winthrop, MA 02152
Residential Address
Telephone Number (optional):

Committee to Elect Heather Engman
Committee Name
Astrid Weins
Name of Committee Treasurer
50 Faun Bar, Winthrop, MA 02152
Committee Mailing Address
Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	N/A
Line 2: Total receipts this period (page 3, line 11)	4290.00
Line 3: Subtotal (line 1 plus line 2)	4290.00
Line 4: Total expenditures this period (page 5, line 14)	3552.68
Line 5: Ending Balance (line 3 minus line 4)	982.00
Line 6: Total in-kind contributions this period (page 6)	872.52
Line 7: Total (all) outstanding liabilities (page 7)	900.00
Line 8: Name of bank(s) used:	Bank of America

Affidavit of Committee Treasurer:
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 all 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: *[Signature]* (Treasurer's signature) Date: **10-26-15**

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: *[Signature]* (Candidate's signature) Date: **10-26-15**

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)
9-14-15	Lisa Alberghini, 79 Quincy Ave, Winthrop, MA 02152	100	
10-26-15	Joseph Boncore, 39 Sagamore Ave, Winthrop, MA 02152	100	
9-14-15	Carmine Cautillo, 222 Grovers Ave, Winthrop, MA 02152	100	
9-14-15	Peter Christopher, 70 Cottage Park Road, Winthrop, MA 02152	30	
9-14-15	Karen Colpak, 60 Bates Ave, Winthrop, MA 02152	100	
8-17-15	Heather Engman, 208 Grovers Ave, Winthrop, MA 02152	300	attorney, MA department of public health
9-10-15	Heather Engman, 208 Grovers Ave, Winthrop, MA 02152	900	attorney, MA department of public health
9-13-15	Heather Engman, 208 Grovers Ave, Winthrop, MA 02152	500	attorney, MA department of public health
9-14-15	Lynn Engman, 34624 Gasink Road, Pequot Lakes, MN 56472	100	
9-3-15	Carol Facella, 3 Seal Harbor Road PH 36, Winthrop, MA 02152	100	
9-3-15	Deb Flynn, 176 Cliff Ave, Winthrop, MA 01252	50	
9-14-15	Alyssa Gamble, 185 Grovers Ave, Winthrop, MA 02152	60	
Line 9: Total Receipts over \$50 (or listed above)		[]	
Line 10: Total Receipts \$50 and under* (not listed above)		[]	
Line 11: TOTAL RECEIPTS IN THE PERIOD		[]	← Enter on page 1, line 2

* 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9-14-15	Peter Gill, 125 Plummer Ave, Winthrop, MA 02152	60	
9-14-15	Carol Lederman, 211 Grovers Ave, Winthrop, MA 02152	60	
9-14-15	Nick LoConte, 86 Grandview Ave, Winthrop, MA 02152	30	
9-14-15	Nicki Bonanno, 41 Washington Ave #3, Winthrop, MA 02152	60	
9-14-15	Lori Lutton, 21 Arlington Ave, Beverly, MA	100	
9-14-15	Ruth Marder, 215 Grovers Ave, Winthrop, MA 02152	60	
9-14-15	Christina Marengi, 62 Nahant Ave, Winthrop, MA 02152	60	
10-18-15	Agustus Martucci, 40 Taylor Street, Winthrop, MA 02152	50	
10-14-15	Kathleen Mascucci, 166 Highland Ave, Winthrop, MA 02152	50	
9-14-15	Alexis McEvoy, 3 Prospect Ave, Winthrop, MA 02152	30	
10-14-15	Asha Mehta, 141 Grovers Ave, Winthrop, MA 02152	150	
9-14-15	Matt Morano, 64 Enfield Road, Winthrop, MA 02152	100	
9-14-15	John Munson, 65 Lowell Road, Winthrop, MA 02152	30	
Line 9: Total Receipts over \$50 (or listed above)		4130	
Line 10: Total Receipts \$50 and under* (not listed above)		160	
Line 11: TOTAL RECEIPTS IN THE PERIOD		4290	← Enter on page 1, line 2

* 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8-17-15	Astrid Weins, 50 Faun Bar, Winthrop, MA 02152	50	
9-14-15	Astrid Weins, 50 Faun Bar, Winthrop, MA 02152	10	

Line 9: Total Receipts over \$50 (or listed above)	<input type="text"/>
Line 10: Total Receipts \$50 and under* (not listed above)	<input type="text"/>
Line 11: TOTAL RECEIPTS IN THE PERIOD	<input type="text"/>

← Enter on page 1, line 2

* 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 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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9-14-15	Don Murphy, 13 Arata Drive, Bar Harbor, ME	100	
9-8-15	Kay O'Dwyer, 52 Cottage Ave, Winthrop, MA 02152	100	
9-14-15	Al Petrilli, 11 Nahant Ave, Winthrop, MA 02152	100	
9-3-15	Jo Poor, 20 Cottage Ave, Winthrop, MA 02152	60	
9-30-15	Alice Reilly, 164 Grovers Ave, Winthrop, MA 02152	50	
9-14-15	Christine Reilly, 5 Floyd Street, Winthrop, MA 02152	30	
8-17-15	Donna Reilly, 30 Cottage Park Road, Winthrop, MA 02152	60	
9-14-15	April Rey, 87 Lowell Road, Winthrop, MA 02152	120	
9-14-15	Paul Roy, 46 Nahant Ave, Winthrop, MA 02152	100	
10-14-15	Paula Semino, 119 Sewall Ave, Winthrop, MA 02152	50	
9-30-15	Pat Sullivan, 59 Nahant Ave, Winthrop, MA 02152	50	
9-3-15	Dave Tick, 207 Grovers Ave, Winthrop, MA 02152	60	

Line 9: Total Receipts over \$50 (or listed above) Line 10: Total Receipts \$50 and under* (not listed above) **Line 11: TOTAL RECEIPTS IN THE PERIOD**

← Enter on page 1, line 2

* 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 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9-10-15	Rolodata	1218 Bennington Street, East Boston, MA 02128	printing	602.18
10-7-15	Rolodata	1218 Bennington Street, East Boston, MA 02128	printing and mailing; lawn signs	1498.21
10-19-15	Rolodata	1218 Bennington Street, East Boston, MA 02128	printing	155.00
10-23-15	Rolodata	1218 Bennington Street, East Boston, MA 02128	printing and mailing	921.00
10-13-15	Rolodata	1218 Bennington Street, East Boston, MA 02128	printing	244.38
Line 12: Total Expenditures over \$50 (or listed above)				3420.77
Line 13: Total Expenditures \$50 and under* (not listed above)				131.91
Line 14: TOTAL EXPENDITURES IN THE PERIOD				3552.68

Enter on page 1, line 4 →

* 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
			Line 12: Expenditures over \$50 (or listed above)	
			Line 13: Expenditures \$50 and under* (not listed above)	
			Line 14: TOTAL EXPENDITURES IN THE PERIOD	

Enter on page 1, line 4 →

* 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
9-12-15	Heather Engman, attorney, MA Department of Public Health	208 Grovers Avenue, Winthrop, MA 02152	campaign event, winthrop arms	872.52
Line 15: In-Kind Contributions over \$50 (or listed above)				872.52
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				872.52

Enter on page 1, line 6 →

* 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.

