



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ELECTION DEPT.
SOMERVILLE, MA

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures

2011 OCT 31 P 4:40

Fill in dates:

Reporting Period Beginning 8/28/11 Ending 10/21/11

Type of report: (Check one)

8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Robert C Trane

Full Name of Candidate (if applicable)

Adrian Ward

Office Sought and District

70 Hooker Ave

Residential Address

617-623-5767

Tel. No. (optional)

CTE Robert Trane

Committee Name

Nancy Trane

Name of Committee Treasurer

70 Hooker Ave

Committee Mailing Address

70 Hooker Ave.

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>1248.00</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>11,874.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>13,122.00</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>8,388.49</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>4734.00</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>28,720</u>
Line 8: Name of bank(s) used	<u>Som Mari Credit Union</u>

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:

Treasurer's signature (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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:

Candidate signature (in ink)

Date

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.

This page may be copied 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)
10/1/11	Thomas Trane 17 Russell Rd Som. 02144	500 00	Retired
" "	Nancy Trane 17 Russell Rd Som MA 02144	500 00	Clerk C. of Somerville
9/2/11	Binoy Pradhan 1274 Broadway Somerville	500 00	Sent letter
9/8/11	Parid Housi	150 00	
9/8/11	Kenneth Koly 73 Unionse Somerville	300 00	Owner Independent Rest.
9/8/11	Michael Capuano 39 High St Somerville	100 00	
9/8/11	Paul Upton Public Safety withheld	100 00	Police officer
9/8/11	Kevin Williams 23 victorie st Somerville	200 00	Rooter / Carroll + Sons
9/14/11	Micki Kennedy 1 Ross Ln Melrose	500 00	CEO Vaccaro Construction
9/14/11	Brian Mount 62 Alpheus Rd Roslindale	500 00	CFO " "
9/14/11	Joe Capuano 39 High St Somerville	100 00	
9/8/11	Raymond Zinghetti 69 Otis St Somerville	250 00	
9/8/11	Dennis Sullivan 138 Ten Hills Rd Somerville	500 00	Com. of Mass. Corrections Dept.
9/3/11	Paul Trane 70 East Emerson St Melrose	500 00	Principal Telecom Insight Group
10/20/11	Danielle Heane 70 East Emerson St Melrose	500 00	Retired
Line 9: Total receipts in excess of \$50 (or listed above)		9910.00 9910.00	
Line 10: Total receipts \$50 and under* (not listed above)		1955 00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		11874.09	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.

John Harrington
Janice Harrington
Gatehouse Media

10 Street & more Rd \$500
Wakfield MA
" " \$500
\$3219.05

Attorney, Self
Home maker
Refund

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

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.

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
10/28	Sage Systems	185 Devonshire Boston MA	Print/mail	\$2,220
10/31	Robert Trane	70 Hooker Ave Loans to CTE	Loan	\$26,500
			Line 18: OUTSTANDING LIABILITIES (ALL)	

Enter on page 1, line 7