



# 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.

2014 JAN 15 P 1:01

**Fill in dates:**

Reporting Period Beginning 10 / 19 / 2013 Ending 12 / 31 / 2013

**Type of report: (Check one)**

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

CAROL A. DEMPKOWSKI

Full Name of Candidate (if applicable)

ALDERMAN AT LARGE

Office Sought and District 02144

39 HAWTHORNE ST. SOMERVILLE MA

Residential Address

617-628-2698

Tel. No. (optional)

COMMITTEE TO ELECT CAROL DEMPKOWSKI

Committee Name

NAT DEMPKOWSKI

Name of Committee Treasurer 02144

39 HAWTHORNE ST. SOMERVILLE MA

Committee Mailing Address

617-628-2698

Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report	\$ <u>109.48</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>1800.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>1909.48</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>1909.48</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>0</u>
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Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>2233.93</u>
Line 8: Name of bank(s) used	<u>WINTER HILL BANK, 5 WINTER AVE SOMERVILLE 02144</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:

[Signature]  
Treasurer's signature (in ink)

1/15/14  
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:

Carol A. Dempkowski  
Candidate signature (in ink)

1/15/2014  
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)
10/23/2013	CAROL DEMPKOWSKI LOAN 394 ANTHORNE ST. SOMERVILLE, MA 02144	1800	00	CANDIDATE
Line 9: Total receipts in excess of \$50 (or listed above)		1800	00	
Line 10: Total receipts \$50 and under* (not listed above)				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		1800	00	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.  
**Page 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.*

This page may be copied 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	
10/28/2013	CONNOLLY PRINTING	17 B GILL ST WOBURN, MA 01801	MAILING	1822	51
12/12/2013	CAROL DEMPkowski	39 HAWTHORNE ST. SOMERVILLE, MA 02144	REPAYMENT OF LIABILITY	66	07
Line 12: Expenditures over \$50				1888	58
Line 13: Expenditures \$50 and under*				20	90
Line 14: TOTAL EXPENDITURES				1909	48

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	NONE			
			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			<b>Line 17: Total In-kind</b>	

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
7/3/2013	CAROL DEMPkowski	39 HAWTHORNE ST. SOMERVILLE, MA 02144	LOAN (REPORTED PREVIOUSLY)	100
10/7/2013	CAROL DEMPkowski	39 HAWTHORNE ST. SOMERVILLE, MA 02144	LOAN (REPORTED PREVIOUSLY)	400
10/23/2013	CAROL DEMPkowski	39 HAWTHORNE ST. SOMERVILLE, MA 02144	LOAN	1800
(12/12/2013)	CAROL DEMPkowski	39 HAWTHORNE ST. SOMERVILLE, MA 02144	REPAYMENT OF LIABILITY	(66.07)
			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	<b>2233.93</b>

Enter on page 1, line 7

39 Hawthorne Street

Somerville, MA 02144

January 17, 2014

Mr. Nicholas Salerno, Chairman

City of Somerville

Board of Election Commissioners

93 Highland Avenue

Somerville, MA 02143

Dear Mr. Salerno:

I forgive the debt of \$2233.93 ending liability. I am dissolving my account. Thank you very much.

Sincerely,



Carol Dempkowski

2014 JAN 17 A 9:28

ELECTION DEPT  
SOMERVILLE, MA