



Commonwealth of Massachusetts

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 13 P 3:33

Fill in dates:

Reporting Period Beginning	Month	Date	Year	Ending	Month	Date	Year
	01	01	2013		12	31	2013

Type of report: (Check one)

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

William M. Roche

Full Name of Candidate (if applicable)

Office Sought and District

17 MacArthur St Somerville, MA 02145

Residential Address

Tel. No. (optional)

Committee to Elect William M. Roche

Committee Name

Walter Cashman

Name of Committee Treasurer

← same

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ 6,152.88
Line 2: Total receipts this period (page 2, line 11)	\$ 120.02
Line 3: Subtotal (line 1 plus line 2)	\$ 6,272.90
Line 4: Total expenditures this period (page 3, line 14)	\$ 1,609.73
Line 5: Ending balance (line 3 minus line 4)	\$ 4,663.17
Line 6: Total in-kind contributions this period (page 4)	\$ -
Line 7: Total (all) outstanding liabilities (page 4)	\$ -
Line 8: Name of bank(s) used	Members Plus Credit Union

Affidavit of Committee Treasurers:

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)

Walter Cashman

Date

1/11/14

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)

William M. Roche

Date

1-13-14

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)
12/30/13	William M. Roche 17 MacArthur St. Somerville, MA ⁰²¹⁴⁵	114	43	
Line 9: Total receipts in excess of \$50 (or listed above)		114	43	
Line 10: Total receipts \$50 and under* (not listed above)		5	59	
Line 11: TOTAL RECEIPTS IN THE PERIOD		120	02	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	
see	Attached				
Line 12: Expenditures over \$50				1,609	73
Line 13: Expenditures \$50 and under*				-	
Line 14: TOTAL EXPENDITURES				1,609	73

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.

CTEWilliam M Roche 2013 Expenditures

Date Paid	To Whom Paid	Address	City	State	Zip	Purpose	Amount
10/2/2013	CTE Bill White	125 Ten Hills Rd	Somerville	MA	02144	Donation	\$ 100.00
9/14/2013	CTE Joe Capuno	39 High St	Somerville	MA	02144	Donation	\$ 100.00
9/14/2013	CTE Mary Jo Rosetti	80 Electric Ave	Somerville	MA	02144	Donation	\$ 100.00
4/2/2013	CTE Maryann Hueston	115 Beacon St	Somerville	MA	02143	Donation	\$ 100.00
10/20/2013	CTE Matt McCaughlin	184 Broadway	Somerville	MA	02145	Donation	\$ 100.00
4/9/2013	CTE Maureen Bastardi	1 Franklin St	Somerville	MA	02145	Donation	\$ 100.00
10/20/2013	CTE Sal DiDomenico	125 Clarence St	Everett	MA	02149	Donation	\$ 100.00
9/30/2013	CTE Steve Roix	21 Pinckney St	Somerville	MA	02145	Donation	\$ 100.00
6/11/2013	CTE Tim Toomey	Sixth St	Cambridge	MA	02141	Donation	\$ 100.00
7/22/2013	CTE Willie Mederois	Linden St	Somerville	MA	02143	Donation	\$ 100.00
10/20/2013	Friends of Maria Curtatone	11 Prospect Hill Ave	Somerville	MA	02145	Donation	\$ 100.00
9/14/2013	Friends of Sean Fitzgerald	46 Garrison Ave	Somerville	MA	02144	Donation	\$ 100.00
7/22/2013	John Forcelles Fund		Teaticket	MA		Donation	\$ 100.00
9/13/2013	Karen Rand Fund (C/O Brian Craven)	361 Concord Dr	Maywood	NJ	07607	Donation	\$ 100.00
3/30/2013	Moran Fund	9 Howe Terr	Methuen	MA	01877	Donation	\$ 100.00
4/23/2013	Walter Cashman (Treasurer)	385 William St	Stoneham	MA	02180	reimbursement for office supplies	\$ 109.73

Total 2013 Disbursements

\$ 1,609.73

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
Enter on page 1, line 6			Line 15: In-kind over \$50	—
			Line 16: In-kind \$50 and under	—
			Line 17: Total In-kind	—

* 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
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	—