

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

CITY OF MELROSE REGISTRARS OF VOTERS

Jean-Daniel Gestriel La Rock Full Name of Candidate (if applicable) School Committee, Melrose Office Sought and District 472 Upham Street, Melrose, MA 02176 J.D. La Lock for Melrose School Committee Committee Name Christina La Lock Name of Committee Treasurer 36 Woodcreet Drive, Melrose MA 02176	
Reporting Period Beginning January 2010 Ending Massaur December 31 20 Type of report: (Check one) Buth day preceding preliminary Buth day preceding election 30 day after election Syear-end report diss Full Name of Candidate (if applicable) Full Name of Candidate (if applicable) Christina Lakik Office Sought and District Wane of Committee Treasurer 472 Uzham Street, Malruse, MA 02176 Reporting Period Beginning January 2010 Ending Massaur December 31 20 T.D. Lakok for Melrose School Committee Christina Lakik Name of Committee Treasurer 36 Wooderest Drive, Malruse, MA 02176	
Sth day preceding preliminary Sth day preceding election 30 day after election Syear-end report diss Sean-Daniel Gastriel La Rock J.D. La Lock for Metrore School Committee Full Name of Candidate (if applicable) Committee Name Christina La Lock Office Sought and District Name of Committee Treasurer 36 Woodcreet Drive, Metrore MA 02176 36 Woodcreet Drive, Metrore MA 02176 36 Woodcreet Drive, Metrore MA 02176 37 Woodcreet Drive, Metrore MA 02176 38 Woodcreet Drive, Metrore MA 02176 38 Woodcreet Drive Materials (Sean Part of the Committee Treasurer MA 02176 38 Woodcreet Drive Materials (Sean Part of the Committee Treasurer MA 02176 39 Woodcreet Drive Materials (Sean Part of the Committee Treasurer MA 02176 39 Woodcreet Drive Materials (Sean Part of the Committee Treasurer MA 02176 39 Woodcreet Drive Materials (Sean Part of the Committee Treasurer MA 02176 39 Woodcreet Drive Materials (Sean Part of the Committee Treasurer MA 02176 39 Woodcreet Drive Materials (Sean Part of the Committee Treasurer MA 02176 39 Woodcreet Drive Materials (Sean Part of the Committee Treasurer MA 02176 39 Woodcreet Drive Materials (Sean Part of the Committee Treasurer MA 02176 39 Woodcreet Drive Materials (Sean Part of the Committee Treasurer MA 02176 39 Woodcreet Drive Materials (Sean Part of the Committee Treasurer MA 02176 39 Woodcreet Drive MA 02176 39 Woo	10
Full Name of Candidate (if applicable) School Committee, Melrose Office Sought and District 472 Uzham Arcet, Melrose, M4 02176 Committee Name Christina Lakek Name of Committee Treasurer 36 Woodcrest Drive, Melrose M4 02176	solution
Office Sought and District Name of Committee Treasurer 472 Upham Merest, Malrice, M4 02176 36 Woodcrest Drive, Melron M4 02176	
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Residential Address (781) 662-0436 Committee Mailing Address 1781) 424-4960	į.
(781) 662-0436 Tel. No. (optional) (781) 424-4960 Tel. No. (optional)	- il)
Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) 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 Earen Beak 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 sta campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this rep and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the red M.G.L. c. 55. Treasurer's signature (in ink) FOR CANNATATE BY MARCONATA	orting neriod
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 state campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G. 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 stat campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this report 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 perjury: Signed under the penalties of perjury:	ement of all

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)	Am	ount	Occupation & Employer (for contributions of \$200 or more)
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	Total receipts in excess of \$50 (or listed above)	0	00	
Line 10: Total receipts \$50 and under* (not listed above)			00	
Line 11: TOTAL RECEIPTS IN THE PERIOD			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.

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amo	unt
12/3/10	Go Beddy. com	14455 N. Hayden Rd. Scottradt, AZ p5260	medite domain have to maintenance	107.	P
10/2:/10	Hooses 17a	37 Glenhower RA. Malrust, MA 02116	Horner Golf tournament fundrainer	330	00
6/3:/10	Metrom Permanent Scholarship Fund	360 Lynn Fell Pkny. Melron MA 02176	denetion	100.	DU
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-					
and the second s				-	
					-
- de		Line 12:	Expenditures over \$50	537.	80
		Line 13:	Expenditures \$50 and under*	123F.	72
I	Enter on page 1, line 4	Line 14:	TOTAL EXPENDITURES	1776.	60

^{*}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 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
		· ·	and the state of t	
		:		
	·			
		Line 15:	In-kind over \$50	0
		Line 16:	In-kind \$50 and under	0
	Enter on page 1, line 6	Line 17	: Total In-kind	Ó

^{*} 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
0/21/09	Jean-Daniel G.	472 Upham Street Melroie, MA 02176	Candidate long to Campayn	1000 33
10/19/08	Jean-Daniel 6. Lahock	472 Upham Heret Marrote, 171 02176	Candidate was to	2000.00
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	3000,00

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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