

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

		File with City of Toronto
Fill in F	Reporting Period dates: Beginning Date:	File with: City or Town Clerk or Election Commission  May 21, 2021 Ending Date: Jun 4, 2021
Type of	Report: (Check one)	- in the second of the second
Language and	ay preceding preliminary 8th day preceding elec	election 30 day after election year-end report dissolution
Y	ael Magen	Committee to Elect Yael Magen
	Candidate Full Name (if applicable)	Committee Name
Board of	Selectmen Office Sevels Albirot	Yotam Mendlinger
16	Office Sought and District 5 W Shore Dr, Marblehead, MA 01945	Name of Committee Treasurer
	Residential Address	165 W Shore Dr, Marblehead, MA 01945
E-mail:	voteyaelmagen@gmail.com	Committee Mailing Address
Phone # (op	tional).	E-mail:yotam@bythesquaretaxes.com
Thone # (op	(617) 981-2391	Phone # (optional): (617) 981-2394
	SUMMARY BAI	ALANCE INFORMATION:
	Line 1: Ending Balance from previous repo	Washington Control of the Control of
9¥	Line 2: Total receipts this period (page 3, li	, line 11) 1,931
	Line 3: Subtotal (line 1 plus line 2)	1,931
	Line 4: Total expenditures this period (page	
X 0	Line 5: Ending Balance (line 3 minus line 4	559.64
	Line 6: Total in-kind contributions this peri	
	Line 7: Total (all) outstanding liabilities (pa	473.00
	Line 8: Name of bank(s) used: National Grand	and Bank
certify that I ctivity, inclu inance activi	ty of all persons acting under the authority or on behalf of this comm	to the best of my knowledge and belief, a true and complete statement of all campaign finance is, in-kind contributions and liabilities for this reporting period and represents the campaign minitee in accordance with the requirements of M.G.L. c. 55.
ignea unaei	r the penalties of perjury:	(Treasurer's signature) Date: Jun 13 2021
Candida I certify to activity, of incurred a	te without Committee	it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance nittee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, seporting period that are not otherwise disclosed in this report.
I certify t finance a campaign	hat I have examined this report including attached schedules and it is ctivity, including contributions, loans, receipts, expenditures, disburs in finance activity of all persons acting under the authority or on behal	it is, to the best of my knowledge and belief, a true and complete statement of all campaign bursements, in-kind contributions and liabilities for this reporting period and represents the chalf of this candidate in accordance with the requirements of M.G.L. c. 55.
gned under	the penalties of perjury:	(Candidate's signature) Date: Jun 13, 2021
	, ,	

#### 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.)

May 26, 2021	Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Dun 1, 2021   Pawton, MA 02459   25d   Natural Therapy   25d   2	May 26, 2021	Cohen, Dorit Trevino Circle		(tor contributions of \$200 or more)
21 Amherst Rd	Jun 3, 2021	735 Saw Mill Brook Pkwy	250	Natural Therapy Owner - Renewellness Face Wash
Agy 22, 2021 Zimmermann, Gil 73 Levbert Rd Newton, MA 02459 180 291 291 291 291 291 291 291 291 291 291	Jun 11, 2021	21 Amherst Rd	125	
May 21, 2021  Rabinowitz, Michal & Guy 27, 2021  Ra	Jun 1, 2021	4 Gloucester St.	250	Southern Division ADL
27 Reservoir Dr   180	May 21, 2021	165 W Shore Dr	270	University Professor, Boston University
May 22, 2021  Ref Brookline St Newton, MA 02459  Rewton, MA 02459  Ref Brookline St Newton, MA 02459  Ref Brookline St Newton Center, MA 02459  Ref Brookline St Ne	May 27, 2021	27 Reservoir Dr	180	
May 26, 2021    Table   Table	May 22, 2021	261 Brookline St	180	
ine 9: Total Receipts over \$50 (or listed above)  180  1,795  190  1,795	May 26, 2021	73 Levbert Rd	180	
ine 10: Total Receipts \$50 and under* (not listed al.	1ay 23, 2021	Zygiel-Almozlino, Naomi 1261 Centre Newton, MA 02450	180	
ine 10: Total Receipts \$50 and under* (not listed al.				
ine 10: Total Receipts \$50 and under* (not listed al.				
ine 10: Total Receipts \$50 and under* (not listed al.				
ine 10: Total Receipts \$50 and under* (not listed above)	Line 9: Total Receipts over \$50 (or listed above)		1,795	
	ine 10: Total Rece	ipts \$50 and under* (not listed above)	136	
ine 11: TOTAL RECEIPTS IN THE PERIOD  1,931  Enter on page 1, line 2			1,931	Enter on page 1 line 2

<sup>\*</sup> 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)

T	Name and Residential Address		
Date Received	(alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
			(10) CONTRIBUTIONS OF \$200 OF MOTE)
_ ]			
ine 9: Total Receipt	ts over \$50 (or listed above)		
ine 10: Total Receip	ots \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD		
If you have itemized re	eceipts of \$50 and under, include them in line		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
Jun 12, 2021	Corner Store Embroidery	60 High St, Clinton, MA 01510	T- Shirts	Amount
Jun 2, 2021	Sir Speedy Boston	98 N. Washington St. Boston, MA 02114	Lawn Signs	520.5
May 3, 2021	Staples	17 Paradise Rd Salem, MA 01970	Sign and Business cards	148.3
Jun 1, 2021	Wix	500 Terry A Francois Boulevard Sixth Floor San Francisco, CA 94158 USA	Domain & Website	54.
		Line 12: Total Expenditures ove		813.59
	Enter on page 1, line $4 \rightarrow$	Line 13: Total Expenditures \$50  Line 14: TOTAL EXPENDITU		177.57

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	
			Tarpose of Expenditure	Amount
	1	Line 12: Expenditures over \$50	0 (or listed above)	
		ine 13: Expenditures \$50 and		
ou have itemized	expenditures of \$50 and under	ine 14: TOTAL EXPENDIT	hould include only those expenditures p	

f 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 Addre	ess Description of Contribution	Value
	Li	ine 15: In-Kind Contribu	ations over \$50 (or listed above)	
	N .		tions \$50 & under (not listed above)	
		ine 17: TOTAL IN-KIN		

<sup>\*</sup> 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.

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### 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
Jun 1, 2021	Magen, Yael	165 W Shore Dr Marblehead, MA 01945	Domain & Website	203.08
May 21, 2021	Mendlinger, Yotam	165 W Shore Dr Marblehead, MA 01945	Initial Funds	270
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	J L	