

Form CPF 111: REPORT OF ASSOCIATION OR OTHER GROUP MAKING CONTRIBUTIONS TO OR EXPENDITURES ON BEHALF OF CANDIDATES, PACS OR PARTY COMMITTEES

Office of Campaign and Political Finance

of Massachuset	tts			
	or aign and Political Finance Place, Room 411	, 1		For Municipal Activity: File with City or Town Clerk or Local Election Commission
	Reporting Period	: from: $\frac{7}{(MM/DD/YYYY)}$ to: (\bar{N})	/2/31/13 MM/pD/YXYY)	_
Type of Repo	rt: 8th day preceding primary/p	oreliminary 8th day preceding ele	ection 30th day after election	January 20th
On behalf of:	State / County Candidates, 1	PACs & Party Committees or	Municipal Candidates	
	ociation or Group: SEIU/N	IAGE Local 5000 CPE Iway, President / Ray P City/State	ID# 80674	N: to C
Name & Title	of Principal Officers: David He	Iway , President / Kay 1	10 Oraty, Legislative	Diverbi
Mailing Addr	ess: 159 Burgin Parkway	City / State /	Zip: Quincy	<u>MA 02169</u>
	7		·	
Determination	of incidental threshold:	Total gross revenues of previous calend	ar year:	\$ 20,000,000
	2.	10% of line 1 or \$15,000, whichever is	less:	\$ 15,000
	3.	Total expenditures, donations to commi	ttees and liabilities incurred during cal	endar year: \$ <u>14,900</u>
		ceeds line 2, reports are required for t		•
POLITICAL I	EXPENDITURES AND CONTRIBU	TIONS TO CANDIDATES/COMMITTI	EES (attach additional pages is necessa	ury):
Date Paid	To Whom Paid (Alphabetical listing)	Address	Purpose (Check box if Inkind Contributi	Amount on Value*
	See Attached			
- :	: 26			
	T C C	1		
	JAN			
	501		Total expenditures/contributions o	n this report:
		To	tal expenditures/contributions previou	sly reported:
			Total expenditures/contribut	

^{*}Inkind contributions (donations of goods or services) should be included in this list.

LIABILITIES*:

Date Incurred	To Whom Due	Address	Purpose	Amount
		#150 #150 100 100 100 100 100 100 100 100 100		
10 L	<u> </u>			
CAMPAIGN &	JAN		Total liabilities on this re	eport:
£.	ਂ ==	Total liabilit	ies previously reported and currently outstan	nding:
5			Total outstanding liabiliti	ies**: . <i>O</i>

- * A liability exists and must be reported if the association or group has received a good or service that it has not paid for, even if the association or group has not received a bill or invoice. If the amount of the liability has not been determined or is in dispute, the liability should be estimated or reported as "to be determined" or "in dispute."
- ** The final report must show zero liabilities.

I certify that this report is a true statement of the amount or value of every gift, payment, expenditure or contribution or promise to give, pay, expend or contribute, together with the date, purpose, and full name and address of the person to whom it was made.

Signed under the penalties of perjury:

Date: //5/19

D/YYYY)

Name: MAYMOOD MC Grath

WHO NEEDS TO FILE THIS FORM?

Once an organization has made political contributions or expenditures or incurred liabilities to support candidates or political committees in excess of the "incidental threshold" (i.e., \$15,000 or 10% of such organization's gross revenues for the previous year, whichever is less), a duly qualified officer must file this report. The report must disclose all contributions and expenditures made and liabilities incurred during the calendar year. The obligation to file a report continues for each year thereafter until the year after a year in which the incidental threshold is not reached.

WHERE SHOULD THIS FORM BE FILED?

State, county and municipal candidates and committees who file with OCPF: If contributions or expenditures are made to support or oppose candidates or committees who file with OCPF, this form should be filed with OCPF.

Municipal candidates and committees who do not file with OCPF: If contributions or expenditures are made to support or oppose candidates or committees who file with local election officials, this form should be filed with the city or town clerk or election commission.

WHERE CAN I GET MORE INFORMATION?

You can view or download OCPF Interpretive Bulletin IB-88-01 from the Legal Resources section of OCPF's website at www.ocpf.us.

Call OCPF at (617) 979-8300 or (800) 462-OCPF.

Date	Trans Description	Debit Amt
7/10/13	GREGG MOREE COMMITTEE	500.00
8/26/13	MATT MCLAUGHLIN COMMITTEE	100.00
8/26/13	ROBERT J. MCWATERS COMMITTEE	250.00
9/9/13	WILLIAM GALVIN COMMITTEE	500.00
9/26/13	MICHAEL BELLOTTI COMMITTEE	500.00
10/8/13	WILLIAM RYAN COMMITTEE	500.00
10/8/13	MAURA RYAN-CIARDIELLO COMMITTE	500.00
12/13/13	CHARLES RYAN COMMITTEE	500.00
12/13/13	STANLEY ROSENBERG COMMITTEE	500.00
12/13/13	MICHAEL W. MORRISSEY COMMITTEE	500.00
12/16/13	WARREN TOLMAN COMMITTEE	500.00
12/16/13	KEN DONNELLY COMMITTEE	500.00
Total		5,350.00

