



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECOMMENDED BY CAMPAIGN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10-20-18 Ending Date: 12-31-18

Type of Report: (Check one)

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

Shalini Bahl-Milne  
Candidate Full Name (if applicable)

City Counselor District 5  
Office Sought and District

78 Linden Ridge Road  
Residential Address

E-mail: shalini.milne@gmail.com

Phone # (optional): \_\_\_\_\_

Committee to Elect Shalini Bahl-Milne  
Committee Name

Thomas Davies  
Name of Committee Treasurer

78 Linden Ridge Rd Andover  
Committee Mailing Address

E-mail: shalini.milne@gmail.com

Phone # (optional): \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

<b>Line 1:</b> Ending Balance from previous report	197.39
<b>Line 2:</b> Total receipts this period (page 3, line 11)	1460.00
<b>Line 3:</b> Subtotal (line 1 plus line 2)	1657.39
<b>Line 4:</b> Total expenditures this period (page 5, line 14)	1568.74
<b>Line 5:</b> Ending Balance (line 3 minus line 4)	88.65
<b>Line 6:</b> Total in-kind contributions this period (page 6)	120.19
<b>Line 7:</b> Total (all) outstanding liabilities (page 7)	-0-
<b>Line 8:</b> Name of bank(s) used:	<u>Florence Savings Bank</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: \_\_\_\_\_

(Treasurer's signature)

Date: 1.16.19

#### FOR CANDIDATE FILINGS ONLY: 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's signature)

Date: 1.16.19

**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
12.4.18	Bahl-Milne, Shalini 78 Linden Ridge Rd Amherst	650.00	Consultant/Owner, Downtown Mindfulness Counselor, Town of Amherst
11.2.18	Bertrand, Clare 610 Bay Rd Amherst	50.00	
10.31.18	Cohen, Kenneth 59 Woodlot Rd Amherst	50.00	
11.1.18	Ellis, Ellen 356 Station Rd Amherst	100.00	
11.19.18	Ely, Tamson 26 Middle St Amherst	50.00	
11.6.18	Hess, Traci 60 Concord Way Amherst	50.00	
11.19.18	Hitchcock Center for Environment 845 West St Amherst	80.00	NOTE: REFUND OF PAYMENT from 9.10.18, EVENT CANCELLED
10.22.18	Larson, Nathaniel 25 Summerfield Rd Amherst	50.00	
11.19.18	Leonard, Deborah 401 Old Farm Rd Amherst	50.00	

Line 9: Total Receipts over \$50 (or listed above) 1130.00

Line 10: Total Receipts \$50 and under\* (not listed above) 330.00

**Line 11: TOTAL RECEIPTS IN THE PERIOD** **1460.00**

← Enter on page 1, line 2





