



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN CLERK'S OFFICE  
WELLESLEY MA 02482  
JAN 23 AM 8:12

File with: City or Town Clerk or Election Commission  
Fill in Reporting Period dates: Beginning Date: 1/1/2023 Ending Date: 12/31/2023

Type of Report: (Check one)

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

**Raina McManus**

Candidate Full Name (if applicable)

**Natural Resources Commission - Town of Wellesley**

Office Sought and District

**2 Mulherin Lane, Wellesley, MA 02481**

Residential Address

E-mail: **RainaforNRC@gmail.com**

Phone #: **(617) 775-5796**

**Committee to Elect Raina McManus**

Committee Name

**Timothy W. Fulham**

Name of Committee Treasurer

**5 Putney Rd., Wellesley, MA 02481**

Committee Mailing Address

E-mail: **t.rainafornc@gmail.com**

Phone #: **(617) 680-5060**

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$436.52</u>
Line 2: Total receipts this period (page 3, line 12)	<u>\$100.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$536.52</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>\$233.24</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$303.28</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>\$0</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>\$0</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>\$0</u>
Line 9: Name of bank(s) used:	<u>Needham 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: Timothy W. Fulham (Treasurer's signature)

Date: 1/20/2024

### FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

#### Candidate with 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 that are not otherwise disclosed in this report.

#### Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Raina McManus (Candidate's signature)

Date: 1/20/2024

a contributor over \$50 in the aggregate more in a calendar year. Receipts didate or committee must keep, det  
butor, add monetary as well as in k  
chedule, and on Schedule E Liabili  
ra page number on each additional

Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

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# SCHEDULE A: RECEIPTS (continued)

RECEIVED  
TOWN CLERK'S OFFICE  
WELLESLEY, MA 02482  
2024 JAN 23 AM 8:12

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 10: Total Receipts over \$50 (or listed above)		\$100.00	<p>* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.</p> <p>← Enter on page 1, line 2</p>
Line 11: Total Receipts \$50 and under (not listed above)			
Line 12: TOTAL RECEIPTS IN THE PERIOD		\$100.00	

## SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule D. *Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.*

[illegible]**Enter expenditure totals on Page 5**



**SCHEDULE B: EXPENDITURES (continued)**[illegible]