



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2024 FEB 27 AM 8:30  
TOWN OF WELLESLEY  
CITY OF BOSTON  
MASSACHUSETTS

Fill in Reporting Period dates:

Beginning Date: 1/1/24

Ending Date: 2/16/24

File with: City or Town Clerk or Election Commission

Type of Report: (Check one)

8th day preceding preliminary

8th day preceding election

30 day after election

year-end report

dissolution

Niki Brinkman Ofenloch

Candidate Full Name (if applicable)

School Committee

Office Sought and District

24 Sabrina Road, Wellesley, MA 02482

Residential Address

E-mail: nikiofenloch@gmail.com

Phone #: 617-676-7901

Niki Ofenloch for School Committee

Committee Name

Jennifer Mock

Name of Committee Treasurer

11 Arden Road, Wellesley, MA 02482

Committee Mailing Address

E-mail: jennifer.mock23@gmail.com

Phone #: 203-434-8916

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 12)

\$2,157.54

Line 3: Subtotal (line 1 plus line 2)

\$2,157.54

Line 4: Total expenditures this period (page 5, line 15)

\$191.12

Line 5: Ending Balance (line 3 minus line 4)

\$1,966.42

Line 6: Total in-kind contributions this period (page 6, line 18)

Line 7: Total (all) outstanding liabilities (page 7, line 19)

\$400

Line 8: Total out-of-pocket expenses this period (page 8, line 22)

Line 9: Name of bank(s) used: Needham Bank

### 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:

*Jennifer Mock*

(Treasurer's signature)

Date: 2/24/24

### 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:

*Pt 23 C*

(Candidate's signature)

Date: 2/24/24

# SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule E Liabilities. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
2/15/24	Beswick, Judith 86 Woodlawn Ave Wellesley, MA 02481	103.48	
2/9/24	Block, Kara Reinhardt 162 Walnut St Wellesley, MA 02482	103.48	
2/12/24	Brinkman, Gaile 15762 W Azalea Lane Surprise, AZ 85374	206.46	Retired
2/15/24	Campbell, Diane 85 Grove St. #305 Wellesley, MA 02482	103.48	
2/16/24	Chatelier, Marguerite 11 Colburn Rd Wellesley, MA 02482	10.80	
2/12/24	Cohen, Lara 28 Appleby Rd Wellesley, MA 02482	103.48	
2/15/24	Deveney, Christen 36 Appleby Rd Wellesley, MA 02482	51.99	
2/17/24	Ferko, Virginia 155 Grove St Wellesley, MA 02482	51.99	
2/15/24	Gupta, Seana 27 Bay State Rd Wellesley, MA 02481	103.48	
2/15/24	Lau, Lillian 16 Kenilworth Cir Wellesley, MA 02482	103.48	
2/16/24	Licata, Michael 67 Brook St Wellesley, MA 02482	51.99	
2/7/24	Manley, Suzanne 56 Leighton Rd Wellesley, MA 02482	50	

Enter receipt totals on Page 3

**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
2/15/24	McConnell, Debra 12 Sabrina Rd Wellesley, MA 02482	51.99	
2/9/24	McMahon, Christine 22 Cottage St Wellesley, MA 02482	51.99	
2/15/24	Mock, Jennifer 11 Arden Rd Wellesley, MA 02482	103.48	
1/22/24	Ofenloch, Niki 24 Sabrina Rd Wellesley, MA 02482	500	
2/15/24	Sebastian, Chelsea 20 Appleby Rd Wellesley, MA 02482	100	
2/15/24	Smith, Mason 50 Emerson Rd Wellesley, MA 02482	51.99	
2/15/24	Spangler, Carolyn 5 Charles River Ct Wellesley, MA 02482	51.99	
2/7/24	Stevens, Kathleen Boland 6 Benton St Wellesley, MA 02482	51.99	
2/15/24	Svedlund, Elizabeth 56 Windsor Rd Wellesley, MA 02481	50	
2/8/24	Van Biert, Kelly 62 Temple Rd Wellesley, MA 02482	100	

Line 10: Total Receipts over \$50 (or listed above) **\$2157.54**

Line 11: Total Receipts \$50 and under (not listed above)

Line 12: **TOTAL RECEIPTS IN THE PERIOD** **\$2157.54**

\* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.

← Enter on page 1, line 2

**SCHEDULE B: EXPENDITURES**

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

Enter expenditure totals on Page 5

**SCHEDULE B: EXPENDITURES (continued)**

\* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.

Enter on page 1, line 4 →

**Line 15: TOTAL EXPENDITURES IN THE PERIOD**

**\$191.12**

Line 14: Expenditures \$50 and under (not listed above)

100

**Line 15: TOTAL EXPENDITURES IN THE PERIOD**

§101.12

**SCHEDULE C: "IN-KIND" CONTRIBUTIONS**

M.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. *Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.*

\* If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.

Enter on page 1, line 6 →

**Line 16: In-Kind Contributions over \$50 (or listed above)**

Line 17: In-Kind Contributions \$50 and under (not listed above)

**Line 18: TOTAL IN-KIND CONTRIBUTIONS IN THE PERIOD**

## **SCHEDULE D: LIABILITIES**

## **SCHEDULE D: LIABILITIES**

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and the outstanding balance, as well as those liabilities incurred during this reporting period.*

Enter on page 1, line 7 →

**Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)**

\$400

**SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES**

**SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES**  
Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. *Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.*

\* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.

← Enter on page 1, line 8