



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2024 Ending Date: 12/31/2024

Type of Report: (Check one)

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

Lisa Collins

Candidate Full Name (if applicable)

Natural Resources Commissioner, Wellesley, MA

Office Sought and District

15 Kenilworth Circle, Wellesley, MA 02482

Residential Address

E-mail: lacollins3@gmail.com (candidate)

Phone # (optional):

Elect Lisa Collins

Committee Name

Myra J. Tucker

Name of Committee Treasurer

15 Kenilworth Circle, Wellesley, MA 02482

Committee Mailing Address

E-mail: LisaCollinsforNRC@gmail.com (Committee)

Phone # (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

\$1,637.76

Line 2: Total receipts this period (page 3, line 11)

59.25

Line 3: Subtotal (line 1 plus line 2)

1,697.01

Line 4: Total expenditures this period (page 5, line 14)

15.00

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

1,682.01

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

0.00

Line 7: Total (all) outstanding liabilities (page 7)

0.00

Line 8: Name of bank(s) used: Citizens 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: [Signature] (Treasurer's signature)

Date: 1/21/2025

### 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: [Signature] (Candidate's signature)

Date: 1/21/2025

## 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.)

[illegible]

2025 JUN 21 11:10:10

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

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

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

(Next pg)

← 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 A: RECEIPTS

Date Received	Contributor First Name	Contributor Last Name	Residential Address
1/24/24	Citizens Bank		PO Box 7000, Providence, RI 02940
1/31/24	Citizens Bank		PO Box 7000, Providence, RI 02940

Amount	Note:
\$ 35.00	Note: Received for Fee Rebates from Citizens Bank
\$ 24.25	Note: Received for Fraudulent Transaction Credit and related Fee Rebate

Line 9: Total Receipts over \$50 (or listed above)  
Line 10: Total Receipts under \$50 and under (not listed above)  
Line 11: TOTAL RECEIPTS IN THE PERIOD

\$ 59.25
\$ -
\$ 59.25

2025 JAN 21 AM 10:10

2025 JAN 21 AM 10:10

## 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.)

[illegible]

Line 12: Total Expenditures over \$50 (or listed above)

Line 13: Total Expenditures \$50 and under\* (not listed above)

Enter on page 1, line 4 →

**Line 14: TOTAL EXPENDITURES IN THE PERIOD**

(Next pg)

\* 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

Date Paid	To Whom Paid (Alphabetical)	Address	Purpose of Expenditure	Amount	Note:
Line 12:	Total Expenditures over \$50 (or listed above)			\$ -	
Line 13:	Total Expenditures \$50 and under (not listed above)			\$ 15.00	see below
Line 14:	TOTAL EXPENDITURES IN THE PERIOD			<u>\$ 15.00</u>	

Note:  
Expenditures described above are < \$50 each, resulting from bank fees to be refunded by Citizens Bank in 2025.

2025 JAN 21 AM 10:10  
CITIZENS BANK  
ATM

## 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 Address	Description of Contribution	Value
N/A	N/A	N/A	N/A	—
			Line 15: In-Kind Contributions over \$50 (or listed above)	—
			Line 16: In-Kind Contributions \$50 & under (not listed above)	—
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	\$0.00

\* 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.



## 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
N/A	N/A	N/A	N/A	—
Enter on page 1, line 7 → <b>Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)</b>				0.00