

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

Committee for a Better Massachusetts

ADDRESS (number and street) 15 Cypress Road

Check if different than previously reported. (ACC) Medford MA 02155

2. **FEC IDENTIFICATION NUMBER ▼** C00542803 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on MM / DD / YYYYYY in the State of  

(d) 30-Day **POST-Election** Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on 06 / 25 / 2013 in the State of MA

5. Covering Period MM / DD / YYYYYY through MM / DD / YYYYYY

06 / 06 / 2013 through 07 / 15 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael Morales

Signature of Treasurer Michael Morales *[Electronically Filed]* Date MM / DD / YYYYYY

09 / 09 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Committee for a Better Massachusetts**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="13098.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="5700.00"/>	<input type="text" value="95700.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="18798.00"/>	<input type="text" value="95700.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="13792.75"/>	<input type="text" value="90694.75"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5005.25"/>	<input type="text" value="5005.25"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Committee for a Better Massachusetts**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5700.00	95700.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5700.00	95700.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5700.00	95700.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	5700.00	95700.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5700.00	95700.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	7368.75	7368.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7368.75	7368.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	6424.00	83326.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	13792.75	90694.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13792.75	90694.75

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5700.00	95700.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5700.00	95700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	7368.75	7368.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7368.75	7368.75

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Committee for a Better Massachusetts**

**A. Michael R. Boyce**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 831 Spinnaker's Reach  
 City State Zip Code  
 Ponte Vedra Beach FL 32082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PQ Corporation Chairman & CEO  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 21 / 2013  
**Transaction ID : SA11AI.4219**  
 Amount of Each Receipt this Period  
 5200.00  
 Contribution

**B. David Walker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 123 Essex Road  
 City State Zip Code  
 Chestnut Hill MA 02467  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cambridge Trust Portfolio Manager  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 09 / 2013  
**Transaction ID : SA11AI.4232**  
 Amount of Each Receipt this Period  
 500.00  
 Individual contribution

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5700.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Committee for a Better Massachusetts**

Full Name (Last, First, Middle Initial)

**A. Madaket Consulting, LLC**

Mailing Address 100 Trade Center  
Suite G - 700

City Woburn State MA Zip Code 01801

Purpose of Disbursement  
Primary election fundraising consulting

001

Category/  
Type

Candidate Name

**Gabriel Gomez**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Special-General

State: MA District:

Date of Disbursement

MM / DD / YYYY  
06 / 21 / 2013

**Transaction ID : SB21B.4241**

Amount of Each Disbursement this Period

6500.00

Full Name (Last, First, Middle Initial)

**B. Madaket Consulting, LLC**

Mailing Address 100 Trade Center  
Suite G - 700

City Woburn State MA Zip Code 01801

Purpose of Disbursement  
consulting fees

001

Category/  
Type

Candidate Name

**Gabriel Gomez**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Special-General

State: MA District:

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2013

**Transaction ID : SB21B.4242**

Amount of Each Disbursement this Period

840.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

7340.00

**TOTAL** This Period (last page this line number only)..... ▶

7340.00

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Committee for a Better Massachusetts</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00542803
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Boston Productions, Inc.</b>		Date MM / DD / YYYY 07 / 08 / 2013
Mailing Address 290 Vandebilt Ave. Suite 1		Amount 5800.00
City Norwood	State MA	Zip Code 02062
Purpose of Expenditure Production Services	Category/ Type 001	<b>Transaction ID : SE.4224</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Office Sought: <input type="checkbox"/> House    State: MA <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
6424.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-General</u>

Full Name (Last, First, Middle Initial) of Payee <b>e-Solutions</b>		Date MM / DD / YYYY 07 / 03 / 2013
Mailing Address 22810 Soledad Canyon Rd.		Amount 105.00
City Santa Clarita	State CA	Zip Code 91350
Purpose of Expenditure Website development	Category/ Type 001	<b>Transaction ID : SE.4226</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Office Sought: <input type="checkbox"/> House    State: MA <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
624.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-General</u>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	5905.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Michael Morales*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
09 / 09 / 2013



