

# Form CPF M 102-0: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

	1	
City or Town of:	SUPBURY	
	101111	

City or To	own of: July	BURY						
		Pleas	e print or ty	pe all informa	tion, except	signatures.		
Fill in dat Reporting	es: ; Period Beginning_	Month Byakz March	Day /Ø	Year ZOIZ	_ Ending_	Month APRIL	Day / ½	Year 2012
□ 8th	Report: (Check One a day preceding liminary/primary	8th day pre	ceding elect	ion X 30	oth day follo	wing election	n × 20	oth day of January ear-End Report)
1. I ce 2. I ce rep	or M.G.L., Chapter or tify that I am a car or tify that I have not orting period, and dertify that I do not h	ndidate for or hol t received any co lo not have a can	ntributions, paign fund	made any exp	penditures, o	r incurred an	y obligations d	uring this
DATE		NATURE penalties of per		II. RESIDEN (Street a	TIAL ADDI	All Committee of the Co	III. OF	FICE SOUGHT
6/6/12	My		14.	BENT B	ROOK	Ru	COMMISSI GUDBUS	Y HOUGING
6/13/1	2 816	hos	15	4 Nobse	ot Po		A	UTHORITY
71.71							MININI	Bomes
							*	
	16							
**************************************								

11/97



# TOWN CLERK Form CPF M 102-0: Campaign Finance Report SUDBURY, MASS

# Municipal Form Office of Campaign and Political Finance

12 APR 17 AM 11:06

City or Town of: 5 M	DBURT						
	Pleas	e print or type a	all information	n, except s	ignatures.		
Fill in dates: Reporting Period Beginning	Month March	Day 1()	Year 2012	Ending_	Month April	Day	Year 2012
Type of Report: (Check One  8th day preceding preliminary/primary		eceding election		day follov	ving election		h day of January ur-End Report)
Pursuant to M.G.L., Chapter  1. I certify that I am a ca 2. I certify that I have no reporting period, and a least figure that I do not be	ndidate for or ho t received any co do not have a can	ntributions, ma npaign fund in o	de any expe	nditures, or	incurred any o	bligations du	ring this

DATE	SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
4/15/12	Grada Quil	W SCOTTS WOOD PRIVE	LINCOLN-SLOBURY SCH CHIE
4/17/18	of - Huer -	of Pine Ridge Rd	Baard of Health
4/20/12	n Am	21 Brookside Farmen	School Committee
5-9-12	MoBrowne	80 Woodmene Dr.	Godoblebay Trutes
	*		



Fill in dates:

## Form CPF M 102-0: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

	Sudbung
City or Town of:	Juapan

Reporting Period Beginning Manch

Month

Day

Please print or type all information, except signatures.

Ending

Day

Year

Year

Tuna of	Panarti (Charle Ona)		
	Report: (Check One)		STATE OF THE STATE
	h day preceding 💛 8th day preceding		
pre	eliminary/primary	(Town or Special)	(Year-End Report)
Pursuant	to M.G.L., Chapter 55:		
	ertify that I am a candidate for or hold Mur ertify that I have not received any contribu		any obligations during this
	porting period, and do not have a campaign		any obligations during this
3. I c	ertify that I do not have a political committee	tee.	
DATE	I. SIGNATURE	II. RESIDENTIAL ADDRESS	III. OFFICE SOUGHT
-	Signed under the penalties of perjury	(Street and Number)	
2 12	Lucie Sengue h hr	752 Concord Rd	School Committee
112112	Liles a. Goudoa	752 Concord Rd 60 Dutton Rd	School Committee Goodnow Lebrary
			J
		,	
			*



# OWN CLERN NAL REPORT SUBURY Form CPF M 102: Campaign Finance Report OM Municipal Form Omce of Campaign and Political Finance

12 APR 25 PM 2: 06

File with:		
City or Town (	Clerk or Election	Commission

or Town Clerk or Election Commission  Please print or type all information	n, except signatures.
Fill in dates:  Reporting Period Beginning MARCH 10 2012	Ending April 25 2012
Type of report: (Check one)  ☐8th day preceding preliminary ☐8th day preceding election	30 day after election
Full Name of Candidate (if applicable)  PLANNING BOARD - SUNCURY  Office Sought and District  321012 LAMCASTER ROAD	Committee Name  Name of Committee Treasurer
Residential Address	Committee Mailing Address
SUXLOTY MA 01776 Tel. No. (optional)	Tel. No. (optional)
Line 1: Ending balance from previous Line 2: Total receipts this period (page 2) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period Line 5: Ending balance (line 3 minus line 4)  Line 6: Total in-kind contributions this p Line 7: Total (all) outstanding liabilities Line 8: Name of bank(s) used	report \$
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the b finance activity, including all contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this constitutions.  Signed under the penalties of	ommittee in accordance with the requirements of M.G.L. c. 55.
Treasurer's signature (in ink)	Date
FOR CANDIDATE FILINGS ONL	Y: (CANDIDATE MUST SIGN BELOW)
Affidavit of Candidate: (check 1 box only)	

Affidavit of Candidate: (check 1 box only)
I certify that I have examined this report including attached schedules and it is, to the second the second the second the second and second the second th
finance activity, of all persons acting under the authority or on behalf of
contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.
finance activity, including commutations, to any least a comparities in accordance with the requirements of M.G.L. c. 55.
finance activity, including contributions, loans, receipts, expenditures, discussements of managements of M.G.L. c. 55.  campaign finance activity of all persons acting under the authority of on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:

Candidate signature (in ink)

#### 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 tumize 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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amo	unt	Occupation & Employer (for contributions of \$200 or more)
3/11/12	Christopher Morely	190	00	
				Sandings Track
		j.		
Line 9:	Total receipts in excess of \$50 (or listed above)	190	-	
Line 10:	Total receipts \$50 and under* (not listed above)			
Line 11:	TOTAL RECEIPTS IN THE PERIOD	190	-	Enter on page 1, line 2  Should include only those receipts not item

<sup>•</sup> 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 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.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

mber on each	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amoun	ıt
Hilin	A.G.E. GRAPHICS	52231 Rte. 248	CAMPAIGN Signs	190 -	_
quijo	M. a. C. Glexpules	45743	317113		
			2: Expenditures over \$50	190	-
		Line 1	3: Expenditures \$50 and under*		
	Enter on page 1, line 4	Line 1	4:TOTAL EXPENDITURES	190	-

<sup>\*</sup>If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 3

#### 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	AND DESCRIPTION OF STREET			
				L YOU
				,
		Line 15:	In-kind over \$50	
	No Leavest dist	Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	-

<sup>\*</sup> 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
				(A
	****			*
	Enter on page 1, line 7	Line 18: OUTSTANDING	G LIABILITIES (ALL)	



#### Form CPF M 102: Campaign Finance Report SUDBURY,

Municipal Form

Office of Campaign and Political Finance

12 APR 17 PM 3:51

End of the Year Report

			40
Fill in dates:  Reporting Period Beginning March 10 20		Dete 15	2012
Type of report: (Check one)  38th day preceding preliminary   8th day preceding election	on 30 day after election	year-end report	□dissolutio
Patricia A Brown			_
Sudbury Planning Board	Comm	ittee Name	
Office Sought and District	Name of Con	mittee Treasurer	
34 Whispering Pine Road			
Sudbury MA 01776	Committee	Mailing Address	
Tel. No. (optional)		Tel. No. (	optional)
SUMMARY BALA	NCE INFORMATION	V:	7
Line 1: Ending balance from pre	vious report	\$ ()	-
Line 2: Total receipts this period	(page 2, line 11)	\$ 338,97	-
Line 3: Subtotal (line 1 plus line 2)		\$ 338. 1	-
Line 4: Total expenditures this p		\$ 338.7	-
Line 5: Ending balance (line 3 minus	s line 4)	3	-11
Line 6: Total in-kind contributions	this period (page 4)	\$ 0	
Line 7: Total (all) outstanding liabi	lities (page 4)	\$ 0	_

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 (in ink)

Date

#### FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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 signature (in ink)

#### 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 tumize 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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address	Amo		Occupation & Employer (for contributions of \$200 or more)
3/22/	Patricia A Brown 34 whispering Pine Road Sudbury, MA 01776	\$338	94	candidate (retired)
	Sudbury, MA 01776			
		7-1-19		
Line 9:	Total receipts in excess of \$50 (or listed above)	\$338	394	
	Total receipts \$50 and under* (not listed above)	C	)	
Line 11:	TOTAL RECEIPTS IN THE PERIOD	\$33 8		Enter on page 1, line 2  should include only those receipts not item

<sup>•</sup> If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Page 2

#### 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.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

number on eac	h page.				
Date Paid	To Whom Paid	Address	Purpose of Expenditure	Amou	nt
	(alphabetical listing)				
3/22/	Connolly Printing 17B Gitt Street Woburn, MA 01801		SIDIAS	\$338	14
3/22:/	17B Git Street		signs	1330	1 1
00 100	Wahusia MA 01801				
	200001171111111111111111111111111111111				
					•:
	<u> </u>				-
			8		
	B Comment of the Comm				
			THE GIRLS STON		
		Line 12:	Expenditures over \$50	\$338	91
			Expenditures \$50 and under		
	1 1 2		TOTAL EXPENDITURES		9.
	Enter on page 1, line 4	Line 14	12 Line 12 should include on		

<sup>\*</sup>If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 3

#### 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.

Date Received	From Whom Received*	Residential Address Description Contribu	
		STATE OF THE STATE	
		Line 15: In-kind over \$5	0
¥		Line 16: In-kind \$50 and	under
	Enter on page 1, line 6	Line 17: Total In-kind	-0-

<sup>\*</sup> 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
	Enter on page 1, line 7	Line 18: OUTSTANDING	G LIABILITIES (ALL)	-0-



of Massachusetts

### TOWN CLERK SUDBURY, MASS

# 12 APR 17 PM 1: 20

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

File with:

City or Town Clerk or Election Commission

4/15/2012

Reporting Period - Beginning: 3/10/2012

Ending: 4/15/2012

Type of report: 30 day after election

Dan De Pompei

Committee to Elect Dan De Pompei

Full Name of Candidate

Committee Name

Selectman Town of Sudbury

Patricia Brown

Office Sought/ District

Name of Committee Treasurer

35 Haynes Road

35 Haynes Road

Sudbury, MA 01776

Sudbury, MA 01776

Residential Address

Committee Address

#### SUMMARY BALANCE INFORMATION

Ending Balance from previous report:	\$903.61
Total receipts this period:	\$1,220.00
Subtotal:	\$2,123.61
Total expenditures this period:	\$1,755.85
Ending Balance:	\$367.76
Total inkind contributions this period:	\$184.17
Total outstanding liabilities:	\$0.00

Name of bank(s) used:

Middlesex Savings 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, inkind 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:

Affidavit of Candidate (check 1 box only) :

oxtimes Candidate with Committee and no activity independent of the committee

I certify that I have examined this report, and 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 and 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, inkind 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

#### 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.

Date	Name and Residential Address	Amount	Occupation and Employer
3/19/2012	Bourne, Sidney 20 Northwood Drive, Unit 403 Sudbury, MA 01776	\$100.00	
3/14/2012	Hullinger, Siobhan 55 Washington Drive Sudbury, MA 01776	\$200.00	homemaker homemaker
3/21/2012	Matthews, Kevin 137 Haynes Road Sudbury, MA 01776	\$500.00	Vice President Collegiate Enterprise
3/19/2012	Mummolo, Mario & Nadia 71 Stock Farm Road Sudbury, MA 01776	\$100.00	
3/16/2012	Wolfe, Richard 637 Concord Road Sudbury, MA 01776	\$300.00	Retired Retired
	zed Receipts mized Receipts pts	\$1,200.00 \$20.00 \$1,220.00	

#### 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 over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
4/15/2012	De Pompei, Dan 35 Haynes Road Sudbury, MA 01776	\$583.80	Liability repayment
4/2/2012	Dufault, Tammie 84 Silver Hill Road Sudbury, MA 01776	\$683.66	Reimbursement (See R1)
3/29/2012	Jet Mail, Inc 577 Main Street Hudson, MA 01749	\$482.29	Mailers
	zed Expenditures mized Expenditures ditures	\$1,749.75 \$6.10 \$1,755.85	

#### Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind 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. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential	Address	Value	Description Occupation/Employer
3/20/2012	Dufault, Tammie 84 Silver Hill Road Sudbury, MA 01776		\$7.99	website renewal Finance Director Osram Sylvania
3/26/2012	Dufault, Tammie 84 Silver Hill Road Sudbury, MA 01776		\$74.00	Election Day lunch Finance Director Osram Sylvania
3/22/2012	Dufault, Tammie 84 Silver Hill Road Sudbury, MA 01776		\$53.24	Stamps (40B mailer) Finance Director Osram Sylvania
3/20/2012	Dufault, Tammie 84 Silver Hill Road Sudbury, MA 01776		\$36.59	T-shirts (AC Moore) Finance Director Osram Sylvania
3/20/2012	Dufault, Tammie 84 Silver Hill Road Sudbury, MA 01776		\$12.35	Sign hardware Townline Hardware Finance Director Osram Sylvania
Total Unite	zed Inkind Contributionized Inkind Contributed Contributions		\$184.17 \$0.00 \$184.17	

#### 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 the liabilities incurred during this reporting period.

Date To Whom Due Amount Purpose

Total Outstanding Liabilities

\$0.00

#### Schedule R: Reimbursements

Date	Reimbursee	Amount
4/15/2012	De Pompei, Dan	\$583.80
4/2/2012	Dufault, Tammie	\$683.66



# Form CPF R1: Itemization of Reimbursements Municipal Form

Office of Campaign and Political Finance

File w	with:				
City o	or Town C	lerk or	Election	Commission	

4/15/2012

De Pompei, Dan

Individual Being Reimbursed

Committee to Elect Dan De Pompei

Committee Name

\$583.80

Amount of Reimbursement

4/15/2012

Date of Reimbursement

Signed under the penalties of perjury:

Candidate's/Treasurer's signature (in ink)

Vendor Name and Address

Amount Purpose

Date

\$583.80

Repayment of Loan

4/15/2012 Dan De Pompei 35 Haynes Road Sudbury, MA 01776



#### Form CPF R1: Itemization of Reimbursements Municipal Form

Office of Campaign and Political Finance

File	with:							
Citv	or Town	Clerk	or	Election	Commission			

4/15/2012

Dufault, Tammie

Individual Being Reimbursed

#### Committee to Elect Dan De Pompei

Committee Name

\$683.66

Amount of Reimbursement

4/2/2012

Date of Reimbursement

Signed under the penalties of perjury:

Candidate's/Treasurer's signature (in ink)

April	17	2012	
-/	7	Date	

Date	Vendor Name and Address	Amount	Purpose
3/21/2012	Central Mass P&DC 192 Main Street Shrewsbury, MA 01546	\$207.00	Mailing of Mailers
3/24/2012	Fedex 375 Cochituate Road Framingham, MA 01701	\$66.12	Mailers
3/20/2012	Fedex 600 Broadway Saugus, MA 01906	\$410.54	Mailers



#### Form CPF M 102: Campaign Finance Report OWN CLERK Municipal Form SUDBURY, MASS

Office of Campaign and Political Finance

th:	12 APR 17 AM II: 06
Town Clerk or Election Commission  Please print or type all information, ex	cept signatures.
ill in dates:  Month   Date   Year  eporting Period Beginning   3   1 0   12   E	Ending 4 / Date //2 Year
ype of report: (Check one) 8th day preceding preliminary □8th day preceding election □30 da	ay after election
myron Ti Fox	NIA
Full Name of Candidate (if applicable)	Committee Name
Office Sought and District 213 Nobscot Ad.	Name of Committee Treasurer
Residential Address Sv. Sorry MY 01776	Committee Mailing Address
Tel. No. (optional)	Tel. No. (optional)
Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this period (page Line 5: Ending balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period Line 7: Total (all) outstanding liabilities (page Line 8: Name of bank(s) used	\$0 d (page 4) \$

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 signature (in ink)



# Form CPF M 102-0: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

Fill in date Reporting	es: Month Day Period Beginning 3 / / 0	Year Month Ending	Day Year
Type of R	eport: (Check One)		
□ 8th	day preceding	election 30th day following electi (Town or Special)	on 20th day of January (Year-End Report)
prel	minary/primary  M.G.L., Chapter 55:		(Teal-Linu Report)
Pursuant to  1. I cer 2. I cer repo		cipal Office. ons, made any expenditures, or incurred a fund in existence.	

	•	
61.		
		117
		11/97



# Form CPF M 102: Campaign Finance Report OWN CLERK Municipal Form SUDBURY, MASS Municipal Form Office of Campaign and Political Finance

12 APR 17 AM 11: 07.

Ill in dates:  Month  Date  Year  Month  Ending	4 15 Dept 2 Year
ype of report: (Check one) 8th day preceding preliminary □8th day preceding election □30 day after election	n □year-end report □dissolu
Toshing MI FOX	
Full Name of Candidate (if applicable)  Comp  N/A	nittee Name
	mmittee Treasurer
	Mailing Address
Tel. No. (optional)	Tel. No. (optional)
SUMMARY BALANCE INFORMATIO	N:
Line 1: Ending balance from previous report	\$ 0
Line 2: Total receipts this period (page 2, line 11)	\$ 0
Line 3: Subtotal (line 1 plus line 2)	\$
Line 4: Total expenditures this period (page 3, line 14)	\$ 0
Line 5: Ending balance (line 3 minus line 4)	<b>S</b>
Line 6: Total in-kind contributions this period (page 4)	<b>S</b> 0
Line 7: Total (all) outstanding liabilities (page 4)	\$ , 0
Line 8: Name of bank(s) used	NA
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 finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance we Signed under the penalties of perjury:	d liabilities for fifts tebotinis berion win rebu

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 signature (in ink)



# Form CPF M 102-0: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

preliminary/primary (Town or Special) (Year-End Report)  Pursuant to M.G.L., Chapter 55:  1. I certify that I am a candidate for or hold Municipal Office. 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence. 3. I certify that I do not have a political committee.	P	lease print or type all information, except sig	natures.
8th day preceding preliminary/primary  8th day preceding election (Town or Special)  20th day of Janua (Year-End Report)  Pursuant to M.G.L., Chapter 55:  1. I certify that I am a candidate for or hold Municipal Office.  2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.  3. I certify that I do not have a political committee.  DATE  Signed under the penalties of perjury  II. RESIDENTIAL ADDRESS  III. OFFICE SOUGHT			1 - 1
Pursuant to M.G.L., Chapter 55:  1. I certify that I am a candidate for or hold Municipal Office. 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence. 3. I certify that I do not have a political committee.  DATE  Signed under the penalties of perjury  II. RESIDENTIAL ADDRESS  III. OFFICE SOUGHT	ype of Report: (Check One)		
I. I certify that I am a candidate for or hold Municipal Office.     I. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.     I. I certify that I do not have a political committee.  DATE  Signed under the penalties of perjury  II. RESIDENTIAL ADDRESS  III. OFFICE SOUGHT (Street and Number)			
Signed under the penalties of perjury (Street and Number)	reporting period, and do not have a	campaign fund in existence.	
16/12 A So Brimstore Lave Allessor			SS III. OFFICE SOUGHT
	16/12	80 Brimstoke la	ene Allessor



Candidate signature (in ink)

# Form CPF M 102: Campaign Finance Report Municipal Form Municipal Form · Office of Campaign and Political Finance

12 MAY 25 AM 9: 06

Please print or type all information, except signatures.  Fill in dates:    North	vich:	
Summary Balance from previous report   Check one)   Summary Balance from previous report   Check one)   Summary Balance from previous report   Committee Name   Committee   Committ	or Town Clerk or Election Commission	me all information except signatures
Emporting Period Beginning   3		pe an information, except signatures.
Step		
Full Name of Candidate (If applicable)  Section 1  Office Sought and District  Boster Catherine  Residential Address  Residential Address  Tel. No. (optional)  Tel. No. (optional)  SUMMARY BALANCE INFORMATION:  Line 1: Ending balance from previous report  Line 2: Total receipts this period (page 2, line 11)  Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this period (page 3, line 14)  Line 5: Ending balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period (page 4)  Line 7: Total (all) outstanding liabilities (page 4)  Line 8: Name of bank(s) used  M. J. Line 8: Name of bank(s) used  M. J. Line 8: Name of bank (s) used  M. J. Lin	Type of report: (Check one)  ☐ 8th day preceding preliminary ☐ 8th day preceding	ing election
Line 1: Ending balance from previous report  Line 2: Total receipts this period (page 2, line 11)  Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this period (page 3, line 14)  Line 5: Ending balance (line 3 minus line 4)  Line 5: Ending balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period (page 4)  Line 7: Total (all) outstanding liabilities (page 4)  Line 8: Name of bank(s) used  Middless Saving Board  Line 8: Name of bank(s) used  Middless Saving Board	Full Name of Candidate (if applicable)  Selectman  Office Sought and District  Boston Post Road  Residential Address  Sudbury MA 0177	Committee Name  William J. Kelly Jr.  Name of Committee Treasurer  31 Church II Street  Committee Mailing Address  Sadbary MA 01776
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 camp finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represent 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:   Date   Date	Line 1: Ending balance from Line 2: Total receipts this p Line 3: Subtotal (line 1 plus line Line 4: Total expenditures t Line 5: Ending balance (line Line 6: Total in-kind contribut Line 7: Total (all) outstanding	m previous report  period (page 2, line 11)  e 2)  this period (page 3, line 14)  3 minus line 4)  utions this period (page 4)  g liabilities (page 4)  \$ 237.25  \$ 400.00  \$ 637.25  \$ 417.71  \$ 219.54
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 camp 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 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 camp finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represent 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:	I certify that I have examined this report including attached schedule finance activity, including all contributions, loans, receipts, expendit campaign finance activity of all persons acting under the authority or Signed un	tures, disbursements, in-kind contributions and liabilities for this reporting period and represent on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Inder the penalties of perjury:
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 camp 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 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 camp finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represent 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:	FOR CANDIDATE FII	LINGS ONLY: (CANDIDATE MUST SIGN BELOW)
	Affidavit of Candidate: (check 1 box only)  Candidate with Committee and no activity independent of the I certify that I have examined this report including attached schedule finance activity, of all persons acting under the authority or on behat contributions, incurred any liabilities nor made any expenditures on Candidate without Committee OR Candidate with Independ I certify that I have examined this report including attached schedule finance activity, including contributions, loans, receipts, expenditure compaign finance activity of all persons acting under the authority of the compaign finance activity of all persons acting under the authority of the compaign finance activity of all persons acting under the authority of the compaign finance activity of all persons acting under the authority of the compaign finance activity of all persons acting under the authority of the compaign finance activity of all persons acting under the authority of the compaign finance activity of all persons acting under the authority of the compaign finance activity of all persons acting under the authority of the compaign finance activity of all persons acting under the authority of the compaign finance activity of all persons acting under the authority of the compaign finance activity of all persons acting under the authority of the compaign finance activity of the compaign finan	he committee  les and it is, to the best of my knowledge and belief, a true and complete statement of all camp  laif of this committee in accordance with the requirements of M.G.L. c. 55. I have not received  my behalf during this reporting period.  dent activity filling separate report  les and it is, to the best of my knowledge and belief, a true and complete statement of all camp  les, disbursements, in-kind contributions and liabilities for this reporting period and represent  or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
LINIE .		Date

#### 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 lumize 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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Ceceived	Name and Residential Address (alphabetical listing required)	Amo	unt	Occupation & Employer (for contributions of \$200 or more)
,				
	-:			
_				
Line 9:	Total receipts in excess of \$50 (or listed above)	0	00	
	Total receipts \$50 and under* (not listed above)	400	1	
Line 10.	TOTAL RECEIPTS IN THE PERIOD	400	1	Enter on page 1, line 2

<sup>•</sup> If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Page 2

#### 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.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

number on each page.

Date Paid	To Whom Paid Address Purpose of Expenditure (alphabetical listing)		Amount		
3/18/12	Sudbury Post Office	Sudbary MA	Stamps	166	40
3/16/12	Sudbury Post Office Laverdar Asian Cuisin	519 A Boston Patter Sudbany	meeting retreshments	132	57
•				A-1	
				41	
	•				
				500	0-
			Expenditures over \$50	298	97
			Expenditures \$50 and under*		74
	Enter on page 1, line 4	Line 1	4:TOTAL EXPENDITURES	417	17

<sup>\*</sup>If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 3

#### 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
•				
		Line 15:	In-kind over \$50	0
		Line 16:	In-kind \$50 and under	0
	Enter on page 1, line 6	Line 17: '	Total In-kind	0

<sup>\*</sup> 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
	,		
	Enter on page 1, line 7	ine 7 Line 18: OUTSTANDING LIABILITIES (ALL)	

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

Page 4