

City or Town of:	dhung					
	Please prin	at or type all informat	ion, except sig	gnatures.		
Fill in dates: Reporting Period Beginning	Month Day March 10	Year 2013	Ending	Month April	Day 25	Year 20/3
Type of Report: (Check One	e)					
8th day preceding preliminary/primary	8th day precedin		h day followi wn or Special			th day of January ar-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 ca 3. I certify that I do not have	ndidate for or hold Mu t received any contribu do not have a campaig	utions, made any expe n fund in existence.	enditures, or i	ncurred any o	bligations di	uring this
	NATURE e penalties of perjury	II. RESIDENT	NAL ADDRI id Number)	ESS	III. OF	FICE SOUGHT
1/13 Robert	Ben	25 Rne	24	Po	rk and	RC Commissimen
	,				***************************************	

	,	



City or Town of: SYDBURY	
Please print or type a	all information, except signatures.
Fill in dates: Month Day Reporting Period Beginning 1/0 Pay	Year Month Day Year Ending 7/25/13
Type of Report: (Check One) 8th day preceding preliminary/primary 8th day preceding election	30th day following election (Year-End Report)
Pursuant to M.G.L., Chapter 55: 1. I certify that I am a candidate for or hold Municipal Of 2. I certify that I have not received any contributions, ma reporting period, and do not have a campaign fund in 6 3. I certify that I do not have a political committee.	de any expenditures, or incurred any obligations during this

DATE	I. SIGNATURE	II. RESIDENTIAL ADDRESS	III. OFFICE SOUGHT
	Signed under the penalties of perjury	(Street and Number)	
8/1/13	MANA	231 Grammys ItILL	PANU TALC
	11 may		
	,		
		•	
			,
	•		



Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

13 MAY 17 AM 10: 17.

of Massachuseits							
City or Town of: Sudbury							
	Plea	ase print or typ	e all informati	on, except signatures.			
Fill in dates: Reporting Period Beginning	Month Harch	Day	Year 2013	Ending April	Day Year	3	
Type of Report: (Check On	e)						
8th day preceding preliminary/primary	□ 8th day p	receding elect		n day following election wn or Special)	20th day of January (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.

	70 1 500	1 CICLLEUP		
	DATE	SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
Life.		Signed under the penanties of perjury	(Sheet and Number)	
#	35	11000		. 20
2	716/1	S/A VALY	137 Hagnes Rd.	Resional School Canada
	121/1	Ric/Appliany	21 Pendeba Rd.	Pak & Rec. Commissioner
6	127/	a Slun Will		gosdnow library truste
7	1013	Yan Offin	> Allene Avenue	Parx + Recreation
,		. , , , , ,		



13 MAY 29 AM 9:53

		Please	print or type	all informa	ion, except s	ignatures.		
Fill in da Reporting	tes: g Period Beginning	Month /	Day	Year 2013	Ending_	Month	Day	Year 2013
Type of I	Report: (Check One))						
	h day preceding eliminary/primary	8th day prec	eding electio		th day follow wn or Speci	ving election al)		th day of January ar-End Report)
'ursuant	to M.G.L., Chapter	55:						
	1		nmittee.	RESIDEN	FIAL ADDR 1d Number)	ESS	III. OF	FICE SOUGHT
			-	(511000 41				
	RRSMA	lng-	(20	Powdle 1	utu Pd	Li	ncoln s	udbury
	PR Sang	frong.	(50	Powdle 1	Min Pd	Li	ncoln si sch	udbury ool Committee
	PR Sang	fng	(7.0	Powdu i	utu Pd	<i>L</i> 1	ncoln si schi	udbury ool Committee
	RR Sarg	fn9	(2.0	Powdle	470 ₽ 4	Li	ncoln Si schi	udbury pol Committee
	RR Sag	fn9-7	(2.0	Powdle	470 Pd	<i>L</i> i	ncoln Si schi	udbury ool Committed
	PR Sag	fr. I.	(2.5)	Powdle	4711 Pd	<i>L</i> 1	ncoln Si sch	udbury pol Committed
		fr.2	(3.0	Powdle	NTII P.		ncoln Si schi	udbury pol Committee



13 MAY 29 All 9:53

own of: SUD	BURY	COMPANY MARKAGE PARTIES					
	Please prin	t or type all i	informati	on, except	signatures.		
es: Period Beginning				Ending	Month 4	Day	Year
eport: (Check Onday preceding iminary/primary		g election					Oth day of January ear-End Report)
rtify that I am a ca rtify that I have no orting period, and o	ndidate for or hold Mu at received any contribu do not have a campaigr	tions, made : fund in existee.	any expe tence.	·			·
					ŒSS		FICE SOUGHT
PRSag	zene-	120 80	wdu M	iu Pd		Lincoln S Sch	adbury on Committee
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					,	
				<del></del>			
			Company of the Compan				
							•
							11/07
	es: Period Beginning eport: (Check Onday preceding iminary/primary o M.G.L., Chapter of the state of the stat	es: Month Day Period Beginning / /  eport: (Check One)  day preceding iminary/primary  o M.G.L., Chapter 55:  rtify that I am a candidate for or hold Murtify that I have not received any contribuorting period, and do not have a campaign	Please print or type all is es:  Month Period Beginning  Bath day preceding election iminary/primary  o M.G.L., Chapter 55:  rtify that I am a candidate for or hold Municipal Office rtify that I have not received any contributions, made orting period, and do not have a campaign fund in exist rtify that I do not have a political committee.  I. SIGNATURE  II. RE Signed under the penalties of perjury  (5)	Please print or type all informations:  Month Period Beginning  Be	Please print or type all information, except ses:  Month Period Beginning  Beginning  Beginning  Month  Day  Year  Period Beginning  Wash day preceding election  iminary/primary  O M.G.L., Chapter 55:  Prify that I am a candidate for or hold Municipal Office.  Prify that I have not received any contributions, made any expenditures, or orting period, and do not have a campaign fund in existence.  I. SIGNATURE  II. RESIDENTIAL ADDRESigned under the penalties of perjury  (Street and Number)	Please print or type all information, except signatures.  es: Month Day Year Month Period Beginning I Sending Y  eport: (Check One)  day preceding iminary/primary (Town or Special)  o M.G.L., Chapter 55:  rtify that I am a candidate for or hold Municipal Office.  rtify that I have not received any contributions, made any expenditures, or incurred a print of the print	Please print or type all information, except signatures.  es: Month Day Year Month Day Period Beginning 1 2013 Ending 4 25  eport: (Check One)  day preceding iminary/primary (Town or Special) (You of M.G.L., Chapter 55:  rtify that I am a candidate for or hold Municipal Office.  rtify that I have not received any contributions, made any expenditures, or incurred any obligations or orting period, and do not have a campaign fund in existence.  rtify that I do not have a political committee.  I. SIGNATURE II. RESIDENTIAL ADDRESS III. OF Signed under the penalties of perjury (Street and Number)





13 MAY 13 AM 11: 13

City or Town of: Sua	bung-	wa ngangangangangan pantungkan mang pangangan pantunggan pantung					
	p	lease print or ty	pe all informati	on, except s	signatures.		
Fill in dates: Reporting Period Beginning_	Month 3	Day	Year Zo 13	Ending_	Month	Day	Year 70/3
Type of Report: (Check One  8th day preceding		preceding elec	ction 30t	•	ving election		h day of January
preliminary/primary Pursuant to M.G.L., Chapter	55:	(M-C	(10	vn or Speci	ai)	( ү ег	ar-End Report)
<ol> <li>I certify that I am a car</li> <li>I certify that I have no reporting period, and c</li> <li>I certify that I do not h</li> </ol>	t received an lo not have a	y contributions campaign fund	, made any expe	nditures, or	incurred any o	bligations du	uring this

DATE	SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
5/10/13	Signed under the penalties of perjury  Uplea Pastury  L	15 briffin Lane	Housing Commussione
***************************************			
trumunkoo dalkakaleen ahkeen ahke			
**************************************			,
والمراورة والمرا			
and the second s			
keeneminestemboet numbers			
u_uuuuuuuuuuuuuuuuuuuuuuuuuuuuuuuuuuuu			
**************************************			aududu oyu yang ada ada da d
#Chingleshamen samples and an entransport from			
hazedomindoenhaddahahahahanee			11/97



13 APR 24 PH 3: 41

<b>D</b> I .				
Please pri	int or type all info	rmation, except signatures.		
	.,	Month Ending <i>Apin'l</i>	Day 15	Year ~23/3
.)				
, , , , , , , , , , , , , , , , , , ,	ng election	30th day following election (Town or Special)	Ø	20th day of January (Year-End Report)
t received any contrib Io not have a campaig	outions, made any gn fund in existen		obligation	ns during this
NATURE penalties of perjury	1		III.	OFFICE SOUGHT
ALD	25 Hosep	to five 1	Brand	of Health
1	Month Da  Month Da  Morel 9  Sth day preceding the street of the street	Month Day Year  Month Pay Year  Month 9 10/3  8th day preceding election  55:  Indidate for or hold Municipal Office.  I received any contributions, made any to not have a campaign fund in existen ave a political committee.  NATURE II. RESID	Sth day preceding election 30th day following election (Town or Special)  55: adidate for or hold Municipal Office. Treceived any contributions, made any expenditures, or incurred any to not have a campaign fund in existence. The average of the state o	Month Day Year Month Day  Month Pack 9 10/3 Ending April 15  8th day preceding election (Town or Special)  55:  Indidate for or hold Municipal Office. Indicate for or hold Mu

	,
 A	11/07



City or Town of: Sudbury		
Please prin	t or type all information, except signatures	
Fill in dates: Month Day Reporting Period Beginning March 9	Year Month  2013 Ending April	Day Year 15, 2013
Type of Report: (Check One)		
8th day preceding preliminary/primary	g election 30th day following elect (Town or Special)	ion  20th day of January (Year-End Report)
Pursuant to M.G.L., Chapter 55:		
<ol> <li>I certify that I am a candidate for or hold Mu</li> <li>I certify that I have not received any contribute reporting period, and do not have a campaign</li> <li>I certify that I do not have a political committee.</li> </ol>	ations, made any expenditures, or incurred in fund in existence.	any obligations during this
DATE I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
3127/13 RAPIDA	37 Belder Dr.	Selectran
, v		

01112	Signed under the penalties of perjury	(Street and Number)	
315711	3 RACIDA	37 Belder Dr.	Selectman
			,
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			



Signed under the penalties of perjury:

### Form CPF M 102: Campaign Finance Report **Municipal Form**

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 3	-9-13 Ending Date: 4-15-13
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election	30 PAY AGEN EUT GEANTEND PROM 30 day after election year-end report dissolution
Candidate Full Name (if applicable)  BONG SF ASSES SON S  Office Sought and District  85 GOODMAN'S ALLE TO  Residential Address	Committee Name  Name of Committee Treasurer  Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	O O
Line 2: Total receipts this period (page 3, line 1)	1)
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, li	ine 14)
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period (p	page 6)
Line 7: Total (all) outstanding liabilities (page 7	
Line 8: Name of bank(s) used:	
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-kin finance activity of all persons acting under the authority or on behalf of this committee.	d contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Heastret's signature)
incurred any liabilities nor made any expenditures on my behalf during this reporti	the best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ng period.
Candidate without Committee OR Candidate with independent activity filing  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of	the best of my knowledge and belief, a true and complete statement of all campaign nts, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date: 4-22-13

(Candidate's signature)



13 MAY -8 AN 10: 56

to with:
y or Town Clerk or Election Commission  Please print or type all information, except signatures.
Fill in dates: Month Date Year Month Date Year Reporting Period Beginning Period Beginning Reporting Period Beginning Per
Type of report: (Check one)  □8th day preceding preliminary □8th day preceding election □30 day after election □year-end report □dissolution
Compaign to Elect Scott Nosa
Full Name of Candidate (if applicable)  Committee Name
Office Sought and District Name of Committee Treasurer
36 Clark Lane 0116 36 Clark Lane 0116
Residential Address Committee Mailing Address
Tel. No. (optional)  Tel. No. (optional)
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  Conditional Substanding Liabilities (page 4)  Line 8: Name of bank(s) used
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 campai finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents to 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
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 campai 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 a 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 campai finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents 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 Hemize 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

Date Name and Residential Address Received (alphabetical listing required)		Amount		Occupation & Employer (for contributions of \$200 or more)
		•		
		1		
	0000 ( 15.4.4.1)			
Line 9: Tot	al receipts in excess of \$50 (or listed above)	110	•	
Line 10: Tot	al receipts \$50 and under* (not listed above) TAL RECEIPTS IN THE PERIOD	43	20 20	1

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized Page 2 abovc.

#### 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

Date Paid	To Whom Paid (alphabetical listing)	( 1 1 .1 .1 .1 .1 .1 .1 .1 .1 .1 .1 .1 .1		Amo	Amount	
3\20	Jelmail Campaign Padner	STO Mainst Hadson, MA 16 Didley St Fitchburg, MA	Postcards; Mailing	64 <i>ક</i>	20	
3\23	Campaign	16 Didley St Fitchburg MA	Website	64 <i>š</i> 23	20	
-		J,				
					·	
			Expenditures over \$50	645	20	
			: Expenditures \$50 and under		-30	
	Enter on page 1, line 4		: Expenditures \$50 and under 4: TOTAL EXPENDITURE			

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not Page 3 itemized above.

#### 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	
	-		In-kind \$50 and under	40.0
	Enter on page 1, line 6		Total In-kind	40.00

^{*} 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
3/20/13	s Jet Mail	Hudson, MA	Postcards, Mailing	645.20
			-	
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	645-20

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



### Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

13 APR 25 AMII: 58

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Mar t	8, 2013	Ending Date:	Apr 24, 2013		
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election		after election y	ear-end report	diss	olution
Matthew Barach	Commit	tee to Elect Matthew Ba	arach		
Candidate Full Name (if applicable)		Comm	mittee Name		
School Committee, Sudbury Public Schools	Susan I	uliano			
Office Sought and District		Name of Co	mmittee Treasurer		
32 Camperdown Lane, Sudbury, MA 01776	22 Jasor	າ Drive, Sudbury, MA 0	1776		
Residential Address		Committee	Mailing Address		
Telephone Number (optional):	Telephone	Number (optional):			***************************************
SUMMARY BALANC	E INFOI	RMATION:			
Line 1: Ending Balance from previous report			1,083.	86	
Line 2: Total receipts this period (page 3, line 11)	) [		4,578.	75	
Line 3: Subtotal (line 1 plus line 2)	lampassessonad		5,662.	61	
Line 4: Total expenditures this period (page 5, lin	ne 14)		4,868.	75	
Line 5: Ending Balance (line 3 minus line 4)			793.	86	
Line 6: Total in-kind contributions this period (pa	age 6)		229.	44	
Line 7: Total (all) outstanding liabilities (page 7)			1,952.	61	
Line 8: Name of bank(s) used: Bank of America					
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:	contributions a accordance wi	nd liabilities for this reportin	g period and represent. c. 55.	ents the cam	n finance paign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	ox 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 activity, of all persons acting under the authority or on behalf of this committee in ac incurred any liabilities nor made any expenditures on my behalf during this reporting	ccordance with	owledge and belief, a true an the requirements of M.G.L. o	d complete stateme c. 55. I have not rec	nt of all cam seived any o	ipaign finance ontributions,
Candidate without Committee OR Candidate with independent activity filing se I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of thi	e best of my kn s, in-kind contr	owledge and belief, a true an ibutions and liabilities for thi	is reporting period a	and represent	ipaign ts the
Sigued under the penalties of perjury:		(Candidate's signatur	re) Date:	4-24	(-1)

#### 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.)

Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Matthew Barach 32 Camperdown Lane Sudbury, MA 01776 LOAN	70	Attorney at Law Self-employed
Matthew Barach 32 Camperdown Lane Sudbury, MA 01776 LOAN	2,749.25	Attorney at Law Self-employed
Matthew Barach 32 Camperdown Lane Sudbury, MA 01776 LOAN	49.5	Attorney at Law Self-employed
Karenina M. Darmer 57 Wagonwheel Road Sudbury, MA 01776	100	Not employed
Karenina M. Darmer 57 Wagonwheel Road Sudbury, MA 01776	100	Not employed
David F. Goodwin 25 Emerson Sudbury, MA	100	
Lisa Gutch 64 Silver Hill Road Sudbury, MA 01776	200	Not employed
Susan Iuliano 22 Jason Drive Sudbury, MA 01776	200	Not employed
Michele MacDonald 100 Old Lancaster Raod Sudbury, MA	100	
Peter T. Masiakos 36 Mossman Road Sudbury, MA 01776	200	Physician Massachusetts General Hospital
Susan Offner 46 Sunset Path Sudbury, MA 01776	100	
John J. Ryan, Junior 155 Ford Road Sudbury, MA 01776	500	Attorney/Business Owner John J. Ryan Insurance Agency
ipts over \$50 (or listed above)	4,468.75	
eipts \$50 and under* (not listed above)	110	
RECEIPTS IN THE PERIOD	4,578.75	← Enter on page 1, line 2
	(alphabetical listing required)  Matthew Barach 32 Camperdown Lane Sudbury, MA 01776 LOAN  Matthew Barach 32 Camperdown Lane Sudbury, MA 01776 LOAN  Matthew Barach 32 Camperdown Lane Sudbury, MA 01776 LOAN  Karenina M. Darmer 57 Wagonwheel Road Sudbury, MA 01776  Karenina M. Darmer 57 Wagonwheel Road Sudbury, MA 01776  David F. Goodwin 25 Emerson Sudbury, MA 01776  Lisa Gutch 64 Silver Hill Road Sudbury, MA 01776  Susan Iuliano 22 Jason Drive Sudbury, MA 01776  Michele MacDonald 100 Old Lancaster Raod Sudbury, MA 01776  Michele MacDonald 100 Old Lancaster Raod Sudbury, MA 01776  Susan Offner 46 Sunset Path Sudbury, MA 01776  John J. Ryan, Junior 155 Ford Road Sudbury, MA 01776  John J. Ryan, Junior 155 Ford Road Sudbury, MA 01776  ipts over \$50 (or listed above)	(alphabetical listing required)AmountMatthew Barach 32 Camperdown Lane Sudbury, MA 01776LOAN70Matthew Barach 32 Camperdown Lane Sudbury, MA 01776LOAN2,749.25Matthew Barach 32 Camperdown Lane Sudbury, MA 01776LOAN49.5Karenina M. Darmer 57 Wagonwheel Road Sudbury, MA 01776100Karenina M. Darmer 57 Wagonwheel Road Sudbury, MA 01776100David F. Goodwin 25 Emerson Sudbury, MA 01776200Susan Iuliano 22 Jason Drive Sudbury, MA 01776200Susan Iuliano 22 Jason Drive Sudbury, MA 01776200Michele MacDonald 100 Old Lancaster Raod Sudbury, MA 01776100Michele MacDonald 100 Old Lancaster Raod Sudbury, MA 01776200Susan Offner 46 Sunset Path Sudbury, MA 01776200John J. Ryan, Junior 155 Ford Road Sudbury, MA 01776500Lipts SVO and under* (not listed above)4,468.75Lipts \$50 and under* (not listed above)110

^{*} 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.

(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.)

*	ditures. Please include your com  To Whom Paid	ing with	r-g-')	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Apr 5, 2013	Matthew Barach	32 Camperdown Lane Sudbury, MA 01776	Repayment of Loan	2,000
Mar 12, 2013	Facebook	Facebook.com	Advertising	70
Mar 20, 2013	The Mailworks	45 Prospect Ave. Albany, NY 12206	Printing, processing and mailing	2,749.25
Mar 21, 2013	U.S. Postal Service	517 Boston Post Road Sudbury, MA	Postage	49.5
L	<u> </u>	Line 12: Total Expenditure	es over \$50 (or listed above)	4,868.75
		Line 13: Total Expenditure	s \$50 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPEN	DITURES IN THE PERIOD	4,868.75

^{*} 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 4

#### 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
Mar 18, 2013	Karenina M. Darmer	57 Wagonwheel Road Sudbury, MA 01776	Postage	59.4
Mar 18, 2013	Lisa Gutch	64 Silver Hill Road Sudbury, MA 01776	Postage	62.7
Mar 20, 2013	Susan Iuliano	22 Jason Drive Sudbury, MA 01776	Postage	65.34
				ad and a second an
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	187.44
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	42
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				229.44

^{*} 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.

Page 6



### Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

		į.				:	v	-	
4.1									

File with: City bot own Clerk br Hepfior Constission Fill in Reporting Period dates: 4-25-2013 Beginning Date: 3-16-2013 Ending Date: Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution Open Up Sudbury Candidate Full Name (if applicable) Committee Name Christopher R. Skiffington Office Sought and District Name of Committee Treasurer 342 Lincoln Road Sudbury MA 01776 Residential Address Committee Mailing Address Telephone Number (optional): Telephone Number (optional): 6178759938 SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report 2006.67 Line 2: Total receipts this period (page 3, line 11) 20.00 Line 3: Subtotal (line 1 plus line 2) 2,026.67 Line 4: Total expenditures this period (page 5, line 14) 2,009.79 **Line 5:** Ending Balance (line 3 minus line 4) 16.88 Line 6: Total in-kind contributions this period (page 6) **Line 7:** Total (all) outstanding liabilities (page 7) 522.09 Line 8: Name of bank(s) used: Citizens Bank & Paypal Affidavit of Committee Treasurer: I certify that I have examined this report including attached sphedules 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. (3/3 Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavil of Candidate (check I 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., e, 55. Date: Signed under the penalties of perjury: (Candidate's signature)

#### 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.)

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
	Scott Sawin 52 Puffer Lane Sudbury MA 01776		
3/17/13	01770	20.00	
		7-1-1	
	]		
		4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
	]		
	]		
	] [		
	] [		
Line 9: Total Rece	cipts over \$50 (or listed above)		
Line 10: Total Rec	eipts \$50 and under* (not listed above)		
to 11. TOTAL	RECEIPTS IN THE PERIOD	20.00 ←	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 (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Rece	ipts over \$50 (or listed above)		
Line 10: Total Rece	sipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD	0 Line 10 alean	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 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount		
Date Paid	See Attached	Address	1 di pose di Expenditure	Amount		
	See Attached					
	1 -	7	7			
	The state of the s					
	200000000000000000000000000000000000000	**************************************				
	J   L	71				
	1	1				
	70-00-00-00-00-00-00-00-00-00-00-00-00-0					
	1	1				
				-		
	1					
		The state of the s				
	1					
		Line 12: Total Expenditures of	over \$50 (or listed above)			
				1		
		Line 13: Total Expenditures \$50 and under* (not listed above)				
		7	CONTINUE OF THE PROPERTY OF TH			
	Enter on page 1, line 4 -	Line 14: TOTAL EXPENDI	TUKES IN THE PERIOD			

^{*} 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 4

Open Up Sudbury - Schedule B Expenditures

DATE	To Whom Paid	Purpose of Expenditure	Address	Amount	Receipt	Note
4/10/13	JetMail Direct	Postage for Mailing	577 Main Street Hudson MA 01749	600 00	, \$	Check 992
4/21/13:	Jet Mail Direct	Postage for Mading	577 Main Street Hudson MA 01749	658.27		Check 993
1/25/13	dossimple	Domain Name Registration	www.dasaaple.com	14,00		Reinbursoment to M. Troiano
2/1/13 -	eSigns	eSigns Preiting	PO Box 38203 Huaston, 1X 77238	582-84		Rembussement to M. Froisco
2/10/13	eSigns	Sign Stakes	PO Box 3820S Honeron, TX 77238	160.80		Rembursement to M. Trogno
1/26/13	Tumbir	Website Theme	35 E 21ST ST NEW YORK NY 10010	49,00		Reimbursement to M. Tromno
2/13/13	PayPal	Transaction Fees	2211 North First Street San Jose, California 95131	0.88		Paypal transaction fees
2/15/13-	Citizens Baok	Checking Fee	Sudbury MA	2 (8)		bank fee
3/15/13	Citizens Bank	Checking Fee	Sudbury MA	2.00		bank fee

Total

2,009.79

### **SCHEDULE B: EXPENDITURES (continued)**

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
***	-			
			1	
	1			
			-	
		Line 12: Expenditures over \$50	(or listed above)	-
		Line 13: Expenditures \$50 and	under* (not listed above)	
		Emo 15. Expenditures 450 and	under (not hated doore)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	

^{*} 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 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		Residential Address	Description of Contribution	Value		
	None this period					
		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 $6 \rightarrow$	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS			

^{*} 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.

Page 6

### 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
lan to March	Mike Troiano	342 Lincoln Road Sudbury MA 01776	Credit Card payments for signs, web site creation and other marketing and advertising materials	522.09



### Form CPF R 1: Itemization of Reimbursements Office of Campaign and Political Finance

Office of Campaign and Political Finance One Ashburton Place, Room 411 Boston, MA 02108 (617) 979-8300

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

		Date of	of Reimbursement:	72013
Name of Individu	nal Being Reimbursed:	ille Troitmo	,	
Committee Name	e:	OPENUP S	, vdbuy	
CPF ID Number	(if applicable):	Telephone N	lumber (optional):	
	ITEMIZ	ZE EXPENDITURES IN EXCESS	S OF \$50	
Date Paid	Vendor Name	Vendor Address	Purpose of Expenditure	Amount
	SceAllached			
	(Include items listed on Page 2) →	Line 1: Expenditures in excess of	\$50 (itemized above):	746.64
		Line 2: Expenditures \$50 or unde	r (not itemized):	
		Line 3: TOTAL AMOUNT REI	MBURSED:	746.64
Signed under th	e penalties of perjury: Signature of Candi	date / Treasurer	Date:	34/28/2013
	Please prepare a separate	report for each reimbursement chec	k issued by the committee.	

Open Up Sudbury - Schedule B Expenditures - For CPF R 1

DATE	To Whom Paid	Purpose of Expenditure	Address	Amount	Receipt	Note
1/25/13	dnssimple	Domain Name Registration	www.dnsmiple.com	14 00	å. i ven en en en en	Rembursement to M. Trorano
2/1/13	eSigns	eSigns Printing	PO Box 38205 Houston, TX 77238	582,84		Reimbursement to M. Troiano
2/10/13	eSigns	Sign Stakes	PO Box 38205 Houston, TX 77238	100,80		Reimbursement to M. Troiano
1/26/13	Tumbli	Website Theme	35 E 21SEST NEW YORK NY 10010	49.00		Reminuscement to M. Trowno
-			Total	746.64	·	

### ITEMIZE EXPENDITURES IN EXCESS OF \$50

Date Paid	Vendor Name	Vendor Address	Purpose of Expenditure	Amount
!				
			1	
		Page 2 Total (add to Line 1 on Pag	e 1):	