

Fill in dates:

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

Office of Campaign and Political Finance

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1 de	r15B+ h	1 Drive
V 50	KI SCIIIN	
HOST	ELECTIO	N REPORT

Day

Year

11/97

Month

City or Town of:	SUBBURY

Month

Day

Please print or type all information, except signatures.

Year

Reporting	g Period Beginning	Ending	
□ 8th	Report: (Check One) In day preceding Sth day preceding liminary/primary	g election 30th day following elect	Jan 20, 2612 1
Pursuant 1. I ce 2. I ce rep	to M.G.L., Chapter 55:	inicipal Office. utions, made any expenditures, or incurred in fund in existence.	
DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/27	Buchaca F. Dur	321 moternt Pd	Good no behory Trucker
4/12/11	Cultural	96 Eld Gamson Fel	& Uning Hous DAuga >
407	in (b) b, (then	19 Summer St	Po A
4/28	Thirth	12 BARBANA ROAS	PANKS: RECOFATION X
-			
	* * * * * * * * * * * * * * * * * * * *		

final End of year 2011 report.



Form CPF M 102: Campaign I Municipal Form Office of Campaign and Political Fi

Final Report BM	
nance	
File with: City or Town Clerk or Election Commission go Date:	n
year-end report dissolution	
Committee Name	
Name of Committee Treasurer	1
Committee Mailing Address	
V:	
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Ö	
0	
0	
0 =	
190.67	
1	
a true and complete statement of all campaign finance r this reporting period and represents the campaign ents of M.G.L. c. 55.	
urer's signature) Date:	

Fill in Reporting Period dates: Beginning Date: March 13 20	Ending Date: Cyril 19,2011	
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 50 day	after election year-end report dissolut	lion
Candidate Full Name (IF applicable) Subbury Public School Committee	Committee Name	
Office Sought and District	Name of Committee Treasurer	
Residential Address Telephone Number (optional): 978 443 4679 Telephone	Committee Mailing Address Number (optional):	
SUMMARY BALANCE INFO	RMATION:	
Line 1: Ending Balance from previous report	0	
Line 2: Total receipts this period (page 3, line 11)	0	
Line 3: Subtotal (line 1 plus line 2)	0	
Line 4: Total expenditures this period (page 5, line 14)	0	6
Line 5: Ending Balance (line 3 minus line 4)	0	
Line 6: Total in-kind contributions this period (page 6)	190.67	
Line 7: Total (all) outstanding liabilities (page 7)		
Line 8: Name of bank(s) used:	三	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowl activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions finance activity of all persons acting under the authority or on behalf of this committee in accordance we	and liabilities for this reporting period and represents the campaig	
Signed under the penalties of perjury:	(Treasurer's signature) Date:	
FOR CANDIDATE FILINGS ONLY: 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 k activity, of all persons acting under the authority or on behalf of this committee in accordance with 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 of Lecrtify that I have examined this report including attached sehedules and it is, to the best of my k finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contractivity of all persons acting under the authority or on behalf of this committee is signed under the penalties of perjury:	mowledge and belief, a true and complete statement of all campai, tributions and liabilities for this reporting period and represents th	
Signed ander the penantes 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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributious of \$200 or more)
ine 9: Total Rece	eipts over \$50 (or listed above)		
ine 10: Total Rec	eipts \$50 and under* (not listed above)		
ine 11: TOTAL	RECEIPTS IN THE PERIOD	0	← 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)
ine 9: Total Recei	pts over \$50 (or listed above)		J L
ine 10: Total Rece	ipts \$50 and under* (not listed above)		
iue 11: TOTAL I	RECEIPTS IN THE PERIOD	0	← 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.)

eport all expenditures. Please include your committee name and a page number on each page.) To Whom Paid						
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
		Line 12: Total Expenditures ov	Line 12: Total Expenditures over \$50 (or listed above)			
		The 12. Total Expelluttures over \$50 (of fisted above)				
		Line 13: Total Expenditures \$50 and under* (not listed above)				
	Enter on page 1 line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	0		
	Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES 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

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
			1-11	
		Line 12. Donardia and 07) (ar listed above)	
		Line 12: Expenditures over \$50		
		Line 13: Expenditures \$50 and	under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	0

^{*} 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	From Whom Received*	Residential Address	Description of Contribution	Value	
3/13/11	Lisa Gutch	64 Silver Aill Rd	Refreshments .	105.67	
3/13/11	Susan Iuliano	22 JasonDr.	Refrishments In home gathering	85	
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	190.67	
		Line 16: In-Kind Contributions	\$50 & under (not listed above		
	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS 190-67				

^{*} 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.

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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: TOTAL OUTSTANDING LIABILITIES (ALL)				





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

City or Town of: 500	lbury		_				
		Please print or	type all informa	tion, except s	ignatures.		
Fill in dates: Reporting Period Beginning	Month 3	Day 28	Year	Ending_	Month	Day 2.7	Year 2011
Type of Report: (Check One 8th day preceding preliminary/primary	_	y preceding el		th day follow	_		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 here.	ndidate for out received and	ny contributior a campaign fui	is, made any exp	enditures, or	incurred any	obligations d	uring this

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/26/V	Park Caife	H Spruce Ln	LSRAS School Committee
	. /		
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			APR 27
-			2
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Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	PO RELEGION COMMISSION COMMISSION
Fill in Reporting Period dates: Beginning Date: 3-20.11	
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 cm.	lay after election
Robert W. Iuliano Candidate Full Name (if applicable)	Committee Name
Goodnas Library Trustec Office Sought and District	Name of Committee Treasurer
22 Jason Drive Residential Address	Committee Mailing Address
Telephone Number (optional):	hone Number (optional):
SUMMARY BALANCE INF	ORMATION:
Line 1: Ending Balance from previous report	-0-
Line 2: Total receipts this period (page 3, line 11)	-0-
Line 3: Subtotal (line I plus line 2)	-0-
Line 4: Total expenditures this period (page 5, line 14)	-0-
Line 5: Ending Balance (line 3 minus line 4)	-0-
Line 6: Total in-kind contributions this period (page 6)	_0-
Line 7: Total (all) outstanding liabilities (page 7)	-0-
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 kn activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributifinance activity of all persons acting under the authority or on behalf of this committee in accordant Signed under the penalties of perjury:	ions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: 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 reactivity, of all persons acting under the authority or on behalf of this committee in accordance incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate responsible.	with the requirements of M.G.L. c. 55. I have not received any contributions,
I certify that I have examined this report including attached schedules and it is, to the best of a finance activity, including contributions, loan, receipts, expenditures, disbursements, in-kind campaign finance activity of all persons activity under the authority or on behalf of this commit	contributions and liabilities for this reporting period and represents the
Signed under the paralties of perjury	(Candidate's signature) Date: 0 4 26 11

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
-			
ine 9: Total Rece	ipts over \$50 (or listed above)		
ne 10: Total Rece	eipts \$50 and under* (not listed above)		
ine 11: TOTAL	RECEIPTS IN THE PERIOD		← 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.



Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance R 27

Fill in Reporting Period dates: Beginning Date: Mar	13, 2011 Ending Date: Apr 27, 2011
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	⊠ 30 day after election
Michael Joseph Hullinger	Committee to Elect Mike Hullinger
Candidate Full Name (if applicable)	Committee Name
Board of Selectman	Siobhan C Hullinger
Office Sought and District	Name of Committee Treasurer
55 Washington Drive,Sudbury,MA 01776	55 Washington Drive,Sudbury,MA01776
Residential Address	Committee Mailing Address
Tclephone Number (optional):	Telephone Number (optional):
SUMMARY BALANC	CE INFORMÂTION:
Line 1: Ending Balance from previous report	1,532,97
Line 2: Total receipts this period (page 3, line 11)	1,517.62
Line 3: Subtotal (line 1 plus line 2)	3,050.59
Line 4: Total expenditures this period (page 5, lin	ne [4] 3,0.5.59
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (pa	age 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: Middlesex Savings	Bank
activity, of all persons aeting under the authority or on behalf of this committee in a incurred any liabilities nor made any expenditures on my behalf during this reporting. Candidate without Committee QR Candidate with independent activity filing so a certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement	contributions and fiabilities for this reporting period and represent the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: pr 27, 2011 ox only) The best of my knowledge and belief, a true and complete statement of all campaign finance coordance with the requirements of M.G.L. c. 55. I have not received a manufactions, g period. The properties of my knowledge and belief, a true and complete statement of all campaign the best of my knowledge and belief, a true and complete statement of all campaign is, in-kind contributions and liabilities for this reporting period and represents the
eampaign finance activity of all persons acting under the authority or on behalf of the Signed under the penalties of periury:	(Candidate's signature) Date: Apr 27, 2011

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Mar 21, 2011	Michael and Juli Brodsky 7 Revere Road Sudbury,MA 01776	100	
Mar 16, 2011	Michael and Denise Garzone 26 Washington Drive Sudbury,MA 01776	100	
Apr 26, 2011	Mike Hullinger 55 Washington Drive Sudbury, MA 01776	277.62	President,Endurance Risk Management Candidate
Mar 14, 2011	John and Kathleen Kohler 33 Possum Lane Sudbury,MA 01776	200	Owner, Jet Mail
Mar 18, 2011	Michael and Jane MacKeen 47 Washington Drive Sudbury, MA 01776	150	
Mar 14, 2011	Kevin J Matthews 137 Haynes Road Sudbury, MA 01776	500	Vice President, Registry of Colleges and University Presidents
Mar 14, 2011	John and Holia Mokdad 12 Revolutionary Road Sudbury, MA 01776	100	
Mar 14, 2011	Scott and Marcy Sawin 52 Puffer Lane Sudbury, MA 01776	40	
Mar 14, 2011	Philip and Catherine Stahan 26 Suffolk Road Sudbury, MA 01776	50	
Line 9: Total Rece	ipts over \$50 (or listed above)	1,517.62	
Line 10: Total Reco	eipts \$50 and under* (not listed above)		
**************************************	RECEIPTS IN THE PERIOD	1,517.62	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
·			
ne. 9: Total Recein	its over \$50 (or listed above)		
TAMES OF THE PROPERTY OF THE PARTY OF THE PA	pts \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD		← 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.)

wa	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Mar 22, 2011	AccelaGraphics	74 Otis Street Westborough, MA 01581	3 banners	302,81
Mar 22, 2011	Constant Contact	1601 Trapelo Road Suite 329 Waltham, MA 02451	Email	37.19
Mar 14, 2011	Gatehouse Media	33 New York Avenue Framingham, MA 01701	Print Ad	1.,030.4
Apr 26, 2011	Jet Mail Services Inc	577E Main Street Hudson, MA 01749	Postcard Mailer	1,078.19
Mar 15, 2011	Sudbury Patch	Online Newspaper Sudbury.Patch.com	Online Ad	450
Mar 11, 2011	Wire Products Inc of Florida	1155 Charles Stree Unit 175 Longwood, Florida 32750	Metal H Frames for Signs	152
	Possession and the second seco			
	Name of the second seco			
A. A				
WALLEST AND	AND THE PROPERTY OF THE PROPER	Line 12: Total Expenditures o	over \$50 (or listed above)	3,050.59
		Line 13: Total Expenditures \$:	50 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	3,050.59

^{*} 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount		
And the second s						
				Personal Control of the Control of t		

			NAMES AND ADDRESS OF THE PROPERTY OF THE PROPE			
		Market Control of Cont		LALLES AND ALLES		
100,000				PTENNIA		
				ROS TO CALLED A MEDICAL DE CALLED		
		Line 12: Expenditures over \$50	(or listed above)			
		Line 13; Expenditures \$50 and	under* (not listed above)			
	Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES 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	From Whom Received*	Residential Address	Description of Contribution	Value	
	VALUE AND	THE ADMINISTRATION OF			
		Line 15: In-Kind Contributions	over \$50 (or listed above)		
	Line 16: In-Kind Contributions \$50 & under (not listed above)				
	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				

^{*} 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	Amouut
ANNOVAMINES IN CONTROL TO CONTROL		Name of the state		
			NDING LIABILITIES (ALL)	



Form CPF M 102-0: Campaign Finance Report

Municipal Form

11 APR 25 AM 8: 59 Office of Campaign and Political Finance

City or Town of:	Ple	ase print or ty	pe all informa	tion, except :	signatures.			
Fill in dates: Reporting Period Beginning	Month March	Day /3	Year 2011	Ending	Month	Day 19	Year 2011	
Type of Report: (Check One 8th day preceding preliminary/primary		receding elec		th day follow	ving election	⊠ ₂₀	Jan Jo th day of Januar ar-End Report)	, 3812
Pursuant to M.G.L., Chapter	55:			*Fin	el repa	+		

- 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	SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
hela	June	10 Rollmaket Ave	Aggessar
2			
	<u> </u>		
ı			
			11/07



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

Of Massachuschs File with: City or Town Clerk of Election Commission					
Fill in Reporting Period dates: Beginning Date: 3 3 2001 Ending Date: 4 19 2011					
Type of Report: (Check one)					
8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution					
Scott B Nassa Scott Nassa for SPS					
Candidate Full Name (if applicable) Committee Name					
School Committee Sudbury MA Scott Nassa					
Office Sought and District Office Sought and District Name of Committee Treasurer					
Residential Address MA 01776 Residential Address MA 01776 Residential Address MA 01776					
Telephone Number (optional): 978-270-2734 Telephone Number (optional): 978-270-2734					
SUMMARY BALANCE INFORMATION:					
Line 1: Ending Balance from previous report					
Line 2: Total receipts this period (page 3, line 11)					
Line 3: Subtotal (line 1 plus line 2) #\764.64					
Line 4: Total expenditures this period (page 5, line 14)					
Line 5: Ending Balance (line 3 minus line 4)					
Line 6: Total in-kind contributions this period (page 6)					
Line 7: Total (all) outstanding liabilities (page 7)					
Line 8: Name of bank(s) used: (itizens Bank of America (craft car)					
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or-on-behalf of this committee in accordance with the requirements of M.G.L. c. 55.					
Signed under the penalties of perjury: Date: 425 2011					
FOR CANDIDATE FILINGS ONLY: 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 anthority 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's signature) Date: 425 2011					

Committee Name	: Scott	Nassa	For	595	Page:	

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.

эссиранон ини стрю	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
3/20/2011	Keun Matthews 137 Haynes Road Sudbury MA 01776	\$500.00	Min Pracident
3/17/2011	Scott Nossa 36 Clark Lane 5-db-ny MA 01716	\$654.57	11:4: 0 -:11
3/25/2011	Scott Nassa 36 Clark Love Sidbury MA 01776	\$250.00	Division Vice fresident OWATER
3/30/2011	Scott Nassa 36 Clark Lane Sudbury MA01776	\$328.19	Division Vice President OWATER
Line 9: Total Recei	ipts over \$50 (or listed above)	\$1732.76	
Line 10: Total Rece	ripts \$50 and under* (not listed above)	#31.88	
Line 11: TOTAL I	RECEIPTS IN THE PERIOD	← 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 (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount		
Aumana	Jetmail Inc	S77 Main St	Post cards			
3/17/2011		Hidson, MA 01749	'	\$654.57		
3/25/2011	Little field Consulting	2714 King St Alexandria VA	ROBO Calls	\$250.00		
3/30/2011	Jetmail Inc	577 Main 57 Halson, MA 01749	Postcards	\$828-19		
	\$1732.76					
	Line 13: Expenditures \$50 and under* (not listed above) #31.88					
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT		#1764,64		

^{*} 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	From Whom Received*	Residential Address	Description of Contribution	Value	
		Line 15: In-Kind Contributions			
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	\$45.00	
	Line 16: In-Kind Contributions \$50 & under (not listed above) \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				

^{*} 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

	File with: City or Town Clerk or Election Commission				
Fill in Reporting Period dates: Beginning Date: Mar 1	3, 2011 Ending Date: Apr 19, 2011				
Type of Report: (Check one)					
☐ 8th day preceding preliminary ☐ 8th day preceding election					
Ellen S. Winer	Committee to Elect Ellen Winer Joachim				
Candidate Full Name (if applicable)	Committee Name				
School Committee Member Sudbury Public Schools	Michael Joachim				
Office Sought and District	Name of Committee Treasurer				
6 Craig Lane Sudbury, MA 01776	6 Craig Lane Sudbury, MA 01776				
Residential Address	Committee Mailing Address				
Telephone Number (optional):	Telephone Number (optional):				
Total more (optionar).	Собрания (брания).				
SUMMARY BALANC	E INFORMATION:				
Line 1: Ending Balance from previous report	0				
Line 2: Total receipts this period (page 3, line 11)	55.21				
Diffe 2. Total receipts this period (page 3, the 11)	33,21				
Line 3: Subtotal (line 1 plus line 2)	55.21				
Line 4: Total expenditures this period (page 5, line	e 14) 55.21 =				
Line 5: Ending Balance (line 3 minus line 4)					
Ente 5. Ending Balance (fille 5 fillinds file 4)					
Line 6: Total in-kind contributions this period (pa	ge 6) 420.67				
Line 7: Total (all) outstanding liabilities (page 7)	550				
Line 8: Name of bank(s) used:					
Zane or rame or ounit(e) used:					
Affidavit of Committee Treasurer:					
It 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	contributions and liabilities for this reporting period and represents the campaign				
finance activity of all persons acting under the pathocity or on boul f of this committee in	accordance with the requirements of M.G.L. c. 55.				
Signed under the penalties of perjury:	(Treasurer's signature) Date:				
FOR CANDIDATE FILINGS ONLY: And uvit of Candidate: (check 1 bo	x only)				
Candidate with Committee and no activity independent of the committee					
	best of my knowledge and belief, a true and complete statement of all campaign finance contains with the requirements of M.G.L. c. 55. I have not received any contributions				
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 habilities 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 arting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.					
Signed under the penaltics of perjury:	(Candidate's signature) Date: 4(27 [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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
**			
ne 9: Total Receip	ots over \$50 (or listed above)		
ne 10: Total Recei	pts \$50 and under* (not listed above)	55.21	
	ECEIPTS IN THE PERIOD	55.21	← 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.)

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
L	· -			
1			THE THINK AND A STATE OF THE ADDRESS	
	-			
111				
		Line 12: Total Expenditures ov	er \$50 (or listed above)	
		T		
		Line 13: Total Expenditures \$50	and under* (not listed above)	55
			-	
		Line 14: TOTAL EXPENDIT		

^{*} 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 13, 2011	Lisa Gutch	64 Silver Hill Road Sudbury, MA 01776	invitations, balloons, refreshments for reception	105.67
Mar 13, 2011	Susan Iuliano	22 Jason Drive Sudbury, MA 01776	items for reception, postage for postcards	113
Mar 13, 2011	Karen Darmer	57 Wagonwheel Road Sudbury, MA 01776	food for reception, postage for postcards	72
				_
	Learner Control Contro			
		Line 15: In-Kind Contribution	ns over \$50 (or listed above)	290.67
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND	CONTRIBUTIONS	420.67

^{*} 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.

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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
Mar 3, 2011	Ellen Winer	6 Craig Lane Sudbury, MA 01776	yard signs	550
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	550



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

11 MAY -2 AM 9: 27

Fill in Reporting Period dates: Beginning Date: 3/13	/2011 Ending Date: 4/19/2011					
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	⊠ 30 day after election					
John Drobinski	Committee to Re-Elect John Drobinski					
Candidate Full Name (if applicable)	Committee Name					
Selectman	William J. Keller, Jr.					
Office Sought and District	Name of Committee Treasurer					
94 Woodside Road, Sudbury, MA 01776	31 Churchill Street, Sudbury, MA 01776					
Residential Address	Committee Mailing Address					
Telephone Number (optional): (978) 443-3525	Telephone Number (optional): (978) 443-4158					
SUMMARY BALANC	CE INFORMATION:					
Line 1: Ending Balance from previous report	650					
Line 2: Total receipts this period (page 3, line 11)	172					
Line 3: Subtotal (line 1 plus line 2)	822					
Line 4: Total expenditures this period (page 5, lin	ne 14) 822					
Line 5: Ending Balance (line 3 minus line 4)	0					
Line 6: Total in-kind contributions this period (pa	age 6) 150					
Line 7: Total (all) outstanding liabilities (page 7)	0					
Line 8: Name of bank(s) used: Citizens Bank						
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or entering efficient multice in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: 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 eampaign 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 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						
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 the	s, in-kind contributions and liabilities for this reporting period and represents the					
Signed under the penalties of perjury:	(Candidate's signature) Date: 4/27/2011					

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
7	<u>9</u> 1		
			N. 1.1.10 (1)
			_
<u>_</u>			Lance and the second se
			_
ne 9: Total Receir	ots over \$50 (or listed above)		
	pts \$50 and under* (not listed above)	172	
***************************************	ECEIPTS IN THE PERIOD	172	
me II: IOIAL K	ECRITS IN THE PERIOD	1/2	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)

Pate 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	eipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		← 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.)

	To Whom Paid			***************************************
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
3/30/2011	AGE Graphics	52231 State Road 248 Long Bottom, OH 45743	Signs	310
3/30/2011	AGE Graphics	52231 State Road 248 Long Bottom, OH 45743	Signs	310
3/30/2011	Community Newspaper Company	33 New York Avenue Framingham, MA 01702	newspaper ad	202
**				
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	822
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	0
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	822

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

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SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid	_	1	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
_				
_				
			`\	
		F3		
			No.	
			1	
		Line 12: Expenditures over \$50	(or listed above)	
Line 13: Expenditures \$50 and under* (not listed above)				
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES 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				

^{*} 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 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: TOTAL OUTSTANI	DING LIABILITIES (ALL)	0

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
		Total Control		
		Line 15: In-Kind Contributions over \$50 (or listed above)		
	Line 16: In-Kind Contributions \$50 & under (not listed above)			150
	Enter on page 1, line 6 →	5 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

^{*} 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.

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