

TOWN CLERK Form CPF M 102: Campaign Finance Report ASS

Municipal Form

2015 APR 22 PM 3: 20

File with: City or Town Clerk or Election Commission

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 3/13/2	15 Ending Date: 4/19/15
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	⊠ 30 day after election
Susan Iuliano	Committee to Elect Susan Iuliano
Candidate Full Name (if applicable)	Committee Name
Sudbury Board of Selectman	Corinne J Meyer
Office Sought and District	Name of Committee Treasurer
22 Jason Drive, Sudbury, MA 01776	8 Skyview Lane, Sudbury, MA 01776
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	2,703
Line 2: Total receipts this period (page 3, line 11)	2,370
Line 3: Subtotal (line 1 plus line 2)	5,073
Line 4: Total expenditures this period (page 5, line	e 14) 1,741
Line 5: Ending Balance (line 3 minus line 4)	3,332
Line 6: Total in-kind contributions this period (page	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	3,192
Line 8: Name of bank(s) used: Santander	
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box 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 accincurred any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee OR Candidate with independent activity filing selection of the committee of the cardinal of the committee of the committee of the cardinal of t	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 4/2//5 Date: 4/2//5 Date: 6 Date: 7 Date: 7 Date: 7 Date: 6 Date: 6 Date: 7 Date: 6 Date: 7 Date
Signed under the penalties of perjury:	(Candidate's signature) Date: 4/22/15

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)
3/18/15	Tracy (Martha) Billig 79 Robert Best Road Sudbury, MA 01776	\$100	
3/23/15	Dan Fox 23 Griscom Road Sudbury, MA 01776	29-LOAN	
Various	Susan Iuliano 22 Jason Drive Sudbury, MA 01776	1,691-LOAN	Attorney Not Employed Please see List of Expenditures for dates of receipt
3/16/15	Michele MacDonald 100 Old Lancaster Road Sudbury, MA 01776	200	None/None
3/14/15	Jack (John) Ryan 155 Ford Road Sudbury, MA 01776	200	Attorney/John J. Ryan Insurance Agency
,			
Line 9: Total Rece	sipts over \$50 (or listed above)	2,220	
Line 10: Total Rec	eipts \$50 and under* (not listed above)	150	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	2,370	← 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 Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$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.

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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
3/18/15	All Right Mailing, Inc. by Iuliano (Loan on Schedule A)	47 Mellen Street Framingham, MA 01702	Printing & Postage for Postcard	\$1,657
3/23/15	Data Ecology/Campaign Partner by Fox (Loan on Schedule A)	16 Dudley Street Fitchburg, MA 01420	Website Hosting Service	29
3/23/15	Framingham Post Office by Iuliano (Loan on Schedule A)	Framingham, MA	Postage	34
	The state of the s			
				1
			s over \$50 (or listed above) \$ \$50 and under* (not listed above)	1,720
	Enter on page 1, line 4 →	Line 14: TOTAL EXPEN	DITURES IN THE PERIOD	1,741

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount		
				+		
:						
-,						
i						
		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 Eval 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 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	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 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
Various	Daniel Fox	23 Griscom Road Sudbury, MA 01776	Loan Repayment	\$92
Various	Susan Iuliano	22 Jason Drive Sudbury, MA 01776	Loan Repayment	3,100
	P*************************************			
	Enter on page 1, line 7	→ Line 18: TOTAL OUTST	ANDING LIABILITIES (ALL)	3,192



Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 3/13/1	File with: City or Town Clerk or Election Commission 5/8/15 Ending Date: 5/8/15
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election [☐ 30 day after election ☐ year-end report ☐ dissolution
Susan Iuliano	Committee to Elect Susan Iuliano
Candidate Full Name (if applicable)	Committee Name
Sudbury Board of Selectman	Corinne J Meyer
Office Sought and District	Name of Committee Treasurer
22 Jason Drive, Sudbury, MA 01776	8 Skyview Lane, Sudbury, MA 01776
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALANCE	E INFORMATION:
Line 1: Ending Balance from previous report	3,332
Line 2: Total receipts this period (page 3, line 11)	О
Line 3: Subtotal (line 1 plus line 2)	3,332
Line 4: Total expenditures this period (page 5, line	14) 3,332
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (pag	e 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: Santander - Closed	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind confinance activity of all persons acting under the authority or on behalf of this committee in account of the committee of activity, of all persons acting under the authority or on behalf of this committee in account of activity, of all persons acting under the authority or on behalf of this committee in account of the committee of the co	ntributions and liabilities for this reporting period and represents the campaign coordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 5////5 Date: 5////5 only) Dest of my knowledge and belief, a true and complete statement of all campaign finance ordance with the requirements of M.G.L. c. 55. I have not received any contributions, period. Parate report Description only in the requirements of many complete statement of all campaign in the complete statement of all campaign in the contributions and liabilities for this reporting period and represents the committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Jeliaco (Candidate's signature) Date: 05-11.2015

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)
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ine 9: Total Recei	pts over \$50 (or listed above)		
ine 10: Total Rece	ipts \$50 and under* (not listed above)		
ine 11: TOTAL F	RECEIPTS IN THE PERIOD		Enter on page 1. line 2
	receipts of \$50 and under include there in lies	<u> </u>	

^{*} 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)

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; i		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ne 9: Total Receipts	over \$50 (or listed above)		
ne 10: Total Receipt	s \$50 and under* (not listed above)		
ne 11: TOTAL REG	CEIPTS 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
4/27/15	Daniel Fox	23 Griscom Road Sudbury, MA 01776	Loan Repayment	\$92
5/8/15	HOPEsudbury, Inc.	PO Box 802 Sudbury, MA 01776	Residual Campaign Funds	155
4/27/15	Susan Iuliano	22 Jason Drive Sudbury, MA 01776	Loan Repayment	3,100
		Line 12: Total Expenditures	over \$50 (or listed above)	3,347
		Line 13: Total Expenditures	\$50 and under* (not listed above)	(15)
	Enter on page 1, line 4	Line 14: TOTAL EXPENI	DITURES IN THE PERIOD	3,332

^{*} 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)

To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
				1
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				· · · · · · · · · · · · · · · · · · ·
		Line 12: Expenditures over \$	50 (or listed above)	
		Line 13: Expenditures \$50 and	· · · · · · · · · · · · · · · · · · ·	
				<u>t</u>
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES 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
				1
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 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
		1		
		1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /		
				:
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	DING LIABILITIES (ALL)	



Office of Campaign and Political Finance

Concommission

of Massichusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	Mar 13, 2015 Ending Date: Apr 19, 2015
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	on 🗵 30 day after election 🔲 year-end report 📋 dissolution
Charles C Woodard	Committee to Reelect Chuck Woodard
Candidate Full Name (if applicable)	Committee Name
Selectman, Sudbury Office Sought and District	Elizabeth Eggleston Name of Committee Treasurer
32 Old Framingham Rd Unit 29, Sudbury, MA 01776	32 Old Framingham Rd Unit 29, Sudbury, MA 01776
Residential Address	Committee Mailing Address
Tetephone Number (optional): (978) 443-0681	Telephone Number (optional):
SUMMARY BALA	ANCE INFORMATION:
Line 1: Ending Balance from previous report	1,000
Line 2: Total receipts this period (page 3, line	e 11) 1,418
Line 3: Subtotal (fine 1 plus fine 2)	2,418
Line 4: Total expenditures this period (page 5.	5, line 14) 2,418
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period	
Line 7: Total (ali) outstanding liabilities (page	
Line 8: Name of bank(s) used: Middlesex Savin	ings Bank
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the activity, including all contributions, toans, receipts, expenditures, disbursements, infinance activity of all persons acting under the authority or on behalf of this committ. Signed under the penalties of perjury:	the best of my knowledge and belief, a true and complete statement of all campaign finance in-kind contributions and liabilities for this reporting period and represents the campaign tittee in accordance with the requirements of M.G.L. c 55. (Treasurer's signature) Date: 4/7 3/15
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check	rk I box only)
activity, of all persons acting under the authority or on behalf of this committee incurred any liabilities nor made any expenditures on my behalf during this report to the committee of the com	s, to the best of my knowledge and belief, a true and complete statement of all campaign linance to in accordance with the requirements of M.G.L. v. 55. I have not received any contributions, porting period
finance activity, including contributions, loans, receipts, expenditures, disburser campaign finance activity of all persons acting under the authority or on behalf	s, to the best of my knowledge and belief, a true and complete statement of all campaign sements, in-kind contributions and liabilities for this reporting period and represents the If of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: Ulwathan	(Candidate's signature) Date: 4/23/15

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)
Mar 15, 2015	David Collins 17925 Kirkshire Beverly Hills, MI 48025	100	
Mar 15, 2015	Jamie Gossels 11 Spiller Circle Sudbury, MA 01776	100	
Маг 21, 2015	Stan Kaplan 98 Victoria Rd Sudbury, MA 01776	288	Executive Director Jewish Cemetery Association of Massachusetts Inc.
Mar 27, 2015	Bob Morrison 16 October Rd Sudbury, MA 01776	100	
Маг 27, 2015	Carl Offner 46 Sunset Path Sudbury, MA 01776	500	Software Engineer Coordinates Operations
The state of the s			
Line 9: Total Rece	ripts over \$50 (or listed above)	1,088	
Line 10: Total Receipts \$50 and under* (not listed above)		330	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,418	← Enter on page 1, tine 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

eport all expenditures. Please include your committee name and a page number on each page.)				
100	To Whom Paid		n en	A 2 4
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Mar 18, 2015	All Right Malling	Framingham, MA	postcard mailing	1,220.84
Mar 19, 2015	Facebook	Menio Park, CA	Facebook ads	150
Mar 13, 2015	FatCow	Burlington, VT	web site	119.88
Mar 13, 2015	Staples	Mariborough, MA	sign and palm cards	97.4
Mar 23, 2015	US Post Office	Sudbery, MA	postcard stamps	68
Apr 9, 2015	Charles Woodard	Sudbury, MA	repay loan	612.54
				I I
<u></u>		Line 12: Total Expenditures ov	er \$50 (or listed above)	2,268.66
Line 13: Total Expenditures \$50 and under* (not listed above)			149.34	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	2,418

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

Page 4



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

Municipal Form

Office of Campaign and Political Finance

2015 APR 30 AM 9: 10

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: Ma	r 22, 2015 Ending Date: Apr 25, 2015
Type of Report: (Check one)	
☐ 8th day preceding preliminary ☐ 8th day preceding election	⊠ 30 day after election
Tammie Rhodes Dufault	
Candidate Full Name (if applicable)	Committee Name
Sudbury Public School Committee	
Office Sought and District	Name of Committee Treasurer
84 Silver Hill Rd, Sudbury, MA 01776	
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 1	1) 0
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, 1	ine 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 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 Signed under the penalties of perjury:	d contributions 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 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,
Candidate without Committee OR Candidate with independent activity filing I certify that I have examined this report including attached schedules and it is, to finance activity, including contributions, loans, receipts, expenditures, disburseme 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: Tank Plants Delau	(Candidate's signature) Date: Apr 25, 2015

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.)

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)	
] [[
<u> </u>		 		
		[]		
]		
		<u> </u>		
ne 9: Total Receip	ots over \$50 (or listed above)	0		
Line 10: Total Receipts \$50 and under* (not listed above)				
11 000 11 0	ECEIDEC IN THE PERIOD			
ne II: TOTAL R	ECEIPTS IN THE PERIOD	0	← Enter on page 1, line 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.

(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
				<u> </u>
				:
				<u> </u>
				- - -
				<u> </u>
		Line 12: Total Expenditures ov	er \$50 (or listed above)	0
		Line 13: Total Expenditures \$50 and under* (not listed above)		0
		, , ,		
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	UKES IN THE PERIOD	L

^{*} 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 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
				}
		Line 18: TOTAL OUTSTAN	DINIO I LA DIE EDVECCALE EL	0



SUDBURY, MASS

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

Office of Campaign and Political Finance

2815 APR 30 PM 2: 44

	File with: City or Town Clerk or Election Commission					
Fill in Reporting Period dates: Beginning Date: 3	(3 5 Ending Date: 4 26 15					
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution					
Candidate Full Name (if applicable)	Committee To Elect Bryan Semple Committee Name					
BOARD OF SELECT MANV Office Sought and District	Name of Committee Treasurer					
Residential Address	Committee Mailing Address Committee Mailing Address					
Telephone Number (optional):	Telephone Number (optional):					
SUMMARY BALANC	E INFORMATION:					
Line 1: Ending Balance from previous report	0.00					
Line 2: Total receipts this period (page 3, line 11)	1345,73					
Line 3: Subtotal (line 1 plus line 2)	1345,73					
Line 4: Total expenditures this period (page 5, line	e 14) [345,73					
Line 5: Ending Balance (line 3 minus line 4)	0.00					
Line 6: Total in-kind contributions this period (pa	ge 6) O, O J					
Line 7: Total (all) outstanding liabilities (page 7)	0.00					
Line 8: Name of bank(s) used:	ens Bank					
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.						
Signed under the penalties of perjury:	(Treasurer's signature) Date: 4-2615					
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 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: 4-26-15					

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)
3-15-15	Mile Curry 32 Stonebrook	25,00	
3-16-15	Meg Kraul 66 Washington Dr.	25.00	
4-16-15	Keun Manhous 137 Hayres Rd.	250.00	Registry for College &U Pres.
4-16-15	Scott Nassa 36 Clarklane	250.00	ennopreneur, seit employed
42-15	Mile Trojano 342 Lincoln Rd.	250.00	Actifiu, cmo
4-26-15	Bryan Semple	545.73	Condidates Contibute
		de de la companya de	
Line 9: Total Receipts over \$50 (or listed above)		780680	1295,73
Line 10: Total Rece	Line 10: Total Receipts \$50 and under* (not listed above)		1211570
Line 11: TOTAL RECEIPTS IN THE PERIOD		Savoor	1345.73 ← 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.)

Teport an expend	report all expenditures. Please include your committee name and a page number on each page.)				
Data Bald	To Whom Paid	A A A A A A A A A A A A A A A A A A A	A		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
4/26/15	JETMAIL	577 Main Street Hidson, MA	direct mail	1,104,73	
3/31/15	Facebook	1 Freebase V4 Mento DK, CA 94041	Adversing	241.00	
- Charles and the second secon					
		Line 12: Total Expenditures ov	er \$50 (or listed above)	1345.73	
Line 13: Total Expenditures \$50 and under* (not listed above)					
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD [345.73]					

^{*} 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
		Line 15: In-Kind Contributions	s 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 C	ONTRIBUTIONS	0.00

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	0.00



Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 3/1	Ending Date: 4/28/15
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election ☐	30 day after election vear-end report dissolution
Candidate Full Name (if applicable)	Committee Name
Subry Wolic School Committee Office Sought and District 30 Meadow brook Circle	Name of Committee Treasurer
Residential Address Telephone Number (optional): 978-579-6936	Committee Mailing Address Telephone Number (optional):
SUMMARY BALANCE	INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	19.51
Line 3: Subtotal (line 1 plus line 2)	19.51
Line 4: Total expenditures this period (page 5, line	$\begin{array}{c c} 14) & \boxed{19.5} \\ \end{array}$
Line 5: Ending Balance (line 3 minus line 4)	0 3
Line 6: Total in-kind contributions this period (page	e 6) O
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 best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind confinance activity of all persons acting under the authority or on behalf of this committee in ac Signed under the penalties of perjury:	ntributions 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	est of my knowledge and belief, a true and complete statement of all campaign finance rdance with the requirements of M.G.L. c. 55. I have not received any contributions, eriod.
capadidate without Committee OR Capadidate with independent activity iming separate certify that I have examined this report including attached schedules and it is, to the befinance activity, including contributions, loans, receipts, expenditures, disbursements, i campaign finance activity of all persons acting and of the authority of on behalf of this campaign finance.	est of my knowledge and belief, a true and complete statement of all campaign n-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date: 4/28/15

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)
3/13/15	Lisa Kouchakdjian 30 Meadaubrook Cirle	19.51	
Line 9: Total Reco	cipts over \$50 (or listed above)		
Line 10: Total Rec	cipts \$50 and under* (not listed above)		
:	RECEIPTS IN THE PERIOD	0 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 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 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.)

report all expenditures. Please include your committee name and a page number on each page.)					
n . n	To Whom Paid		,		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
3/13/15	Lisa Kachardjian	39 Meadowbrock Cinter	Stickers for Sigw	19.51	
		Line 12: Total Expenditures over	er \$50 (or listed above)		
	Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD 19. * If we have itemized a readitives of \$50 and under item to line 12. Line 13 should include only those expenditures not item.					

^{*} 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



Office of Campaign and Political Finance

City or Town of: Sual	oury		-				
		Please print or t	ype all infor	mation, except	signatures.		
Fill in dates: Reporting Period Beginning	Month [Day (Year 4015	Ending_	Month	Day 27	Year 2015
Type of Report: (Check One	e)						
8th day preceding preliminary/primary	□ 8th da	y preceding ele		30th day follow (Town or Speci			th day of January ar-End Report)

- 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	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/27/15	Robert 9. Deni	7 Thompson Dr	Selectman
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			2 43
6		<u> </u>	11/97 PR 27
			PM
			PNI2: 45
1.9	58+80++876	niet2 .0	Robert



Office of Campaign and Political Finance



(Year-End Report)

City or Town of: 3UL	BURY						
	Pleas	e print or ty	pe all informa	tion, except	signatures.		
Fill in dates: Reporting Period Beginning_	Month March	Day 1/3/6	Year 20/5	Ending_	Month Opul	Day 30, 20,	Year
ype of Report: (Check One	()						
8th day preceding	8th day pre	ceding elect	ion 🗵 30	th day folloy	ving election	X 20th	day of January

(Town or Special)

Pursuant to M.G.L., Chapter 55:

preliminary/primary

- 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	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS	III. OFFICE SOUGHT
		(Street and Number)	
5/11	Mucusa	48 Henry's Mill	& ModerATOL
		· · · · · · · · · · · · · · · · · · ·	
		· · · · · · · · · · · · · · · · · · ·	



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

of Marsachusetts	,	
City or Town of: SUDBURY		
Please prin	t or type all information, except signature	s.
Fill in dates: Month Day Reporting Period Beginning MPROH 13	Year Month <u>8015</u> Ending <u>DECE</u>	Day Year 4BER 31 2015
Type of Report: (Check One) 8th day preceding 8th day preceding preliminary/primary	g election 30th day following elec (Town or Special)	tion 20th day of January (Year-End Report)
 I certify that I am a candidate for or hold Mu I certify that I have not received any contribureporting period, and do not have a campaign I certify that I do not have a political commit 	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
29/15 Luci Amost A 4m	752 Concord Rd	Sudbury School Coming
29-15 Coff Many	321012 CANCAGENTS	Planing Boya
14/15 Lelya Stoldow	60 Dutton Rd	Library Gruntee
	•	
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11/97

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Office of Campaign and Political Finance

2015 APR	MOL
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		riease print or type a	ii inioi	mation, except signatures.		ف
Fill in dates: Reporting Period Beginning	Month 3/13	Day /15	Year	Month Ending	Day / 9 / 15	Year
Type of Report: (Check On	e)			160		
8th day preceding preliminary/primary	□ 8th day	y preceding election		30th day following election (Town or Special)		day of January -End Report)

Pursuant to M.G.L., Chapter 55:

City or Town of: Sudbur

- 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	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
4/26	Yung Pomlo	16 Pine Street	Library Trustee
			Ĭ.
	,		



Office of Campaign and Political Finance

City or Town o	Sydbory	
Cmy or 10		100

Please print or type all information, except signatures

Fill in dates: Reporting Period Beginning	Month 03	Day 13	Year 2015	Ending_	Month O4	Day 19	7615 Year
Type of Report. (Check One				St. de Giller	in a election	0/	20th day of January
8th day preceding preliminary/primary	□ 8th da	y preceding election		Oth day follow Fown or Specia			(ear-End Report)

- 1. I certify that I am a candidate for or hold Municipal Office.
- 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	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
29/15	Robert Beagn	25 Pu St	Part & Rec Commision
			2015
			\$ 500
			- 52
			PH 4:37
MS II			



Office of Campaign and Political Finance

2015 APR 29 PM 12: 30

City or Town of: 5 M	1BURY	ease print or t	- ype all information, exc	ept signatures.		
Fill in dates: Reporting Period Beginning	Month 3	Day / 2	Year 2015 Endi	Month ng 7	Day 20	Year 2019
Type of Report: (Check One 8th day preceding preliminary/primary		preceding elec	ation 30th day fo	ollowing election		h day of January r-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	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
4/28/	-// Mull	231 GOODMANS IfICE	PTR Commission
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		4	•
	*		
}			



Office of Campaign and Political Finance

OWN CLERK UDBURY, MASS 2015 APR 29 PM 7: 21

City or Town of:	Sudbun	

	P	lease print or	type all informat	ion, except signatures	i.	RK NSS
Fill in dates: Reporting Period Beginning	Month	Day (Year 20\5	Month Ending	Day 30	Year 2015
Type of Report: (Check One	:)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
8th day preceding preliminary/primary	□ 8th day	preceding ele		th day following elections or Special)		th day of January ar-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	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/28/15	CurilaQuel	20 Scotts Wood Drive	L-S School Commette
		•	
			•
	V-1-1-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		



Office of Campaign and Political Finance



City or Town of:_	SUDBUPY	
	_	?

Please print or type all information, except signatures.

Fill in dates: Reporting Period Beginning	Month JANUADY	Day 1, 2015	Year	•	tonth Map CH	Day 12	Year ZOVS
Type of Report: (Check On 8th day preceding preliminary/primary		eding election	ফ্	30th day followin (Town or Special)		S	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.

DATE	i. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
3/10/15	Mari	26 BOMDSTCH PO, SUBBURY	PWANNING FOARD
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Office of Campaign and Political Finance

2015	-0
M	DBU
~	- C
MII:5	Y, MASS

City or Town of: Sudbury

Please print or type all information, except signatures.

Fill in dates:	Mon	th Day	1404	Year		Month	Day	Year
Reporting Period Beginning_		3 13	20	13	Ending_	4	19	2015
						•		
Type of Report: (Check One)				_	1.5		•
8th day preceding preliminary/primary		8th day preceding	election		Oth day follow Fown or Specia			0th day of January ear-End Report)

Pursuant to M.G.L., Chapter 55:

- 1. I certify that I am a candidate for or hold Municipal Office.
- 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	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT	
11815	17/	80 Brinston Lune	Board of Assessors	
	- U			
		4		
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		0		
*				
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	3			



Office of Campaign and Political Finance

LOWN CLERK

2015 JUN 18 PM 1: 23

	Plea	ase print or type	all informa	ation, except signatures.		
Fill in dates: Reporting Period Beginning	Month MARCH	Day 13	Year <i>201</i> 5	Month Ending APRIL	Day 19	Year 2015
Type of Report: (Check One	e)					
8th day preceding preliminary/primary	□ 8th day p	receding election		Oth day following election own or Special)		oth day of January ear-End Report)

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 I. SIGNATURE Signed under the penalties of perjury II. RESIDENTIAL ADDRESS (Street and Number)

4/18/1, A - Hart F Price R. dg = Rd. Board of Hearth

Correcte V 8/25



Form CPF M 102: Campaign Finance Report

Municipal Form

OWN CLERK

Office of Campaign and Political Finance 2015 JUL -8 PHIZION File with: City or To Fill in Reporting Period dates: 3/24/2015 Beginning Date: **Ending Date:** Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution MICHAEL T ENSLET ENSLEY FOR SELECTMAN CAMPAIGN Candidate Full Name (if applicable) Committee Name BOARD OF SELECTMAN STEPHANIE BECKELITH Office Sought and District Name of Committee Treasurer 598 PEAKLIAM LOAD SUBBURY 01776 598 PEAKHON ROAD SUBBURY MADITTE Residential Address Committee Mailing Address Telephone Number (optional): Telephone Number (optional): SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report 252847 Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) 340347 Line 4: Total expenditures this period (page 5, line 14) 3106 Line 5: Ending Balance (line 3 minus line 4) 29187 Line 6: Total in-kind contributions this period (page 6) 13018 Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used: SALEM FIVE 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 by 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) 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 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: Date: (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 contributions of \$200 or more)
3/24/15	BURKE, BRENDAH 141 DAKIN RD	#10000	
3/24/2015	GINAND, SARAH 31GREAT LAKE DRIVE	#10000	
3/25/2016	LYOU'S TIM 206 ROBIN DR INCLINE VLY NV	10000	
3/24/2016	MATHEMS KEVILI 137 HAYNES ROAD	\$250°°	EDUCATIONISC CONSULTANT
3/24/2018	NOBILE, MICHAEL 17LETIENT CIRCLE	±100	
3/24/2015	SKIFFILLETON, CHINS 69 BUTHER ROAD	¥100	
Line 9: Total Recei	pts over \$50 (or listed above)	\$750°°	
Line 10: Total Rece	ipts \$50 and under* (not listed above)	¥125°°	
	RECEIPTS IN THE PERIOD	# 875°°	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.

OCHEDOED, EATERDRIURES

M.C.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 or each page.

report all expen	To Whom Paid	ommittee name and a page number	on each page.)	<u> </u>
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
3/25/2015	HOMEDEPOT (LOAN TO ENSLEY)	MALLBOLD MA	5144 MATERIAL	254 56
3/29/2016	(LOAN TO ENSLEY)	SUBBURY MA	FOOD FOR VOLUNTEERS	\$55 85
3/25/2015	JET MAIL	HUDSON MA	MAILERS	2,780 ⁴⁵
<u></u>		Line 12: Total Expenditures ove	er \$50 (or listed above)	3090 8x
			\$ 1676	
	Enter on page 1, line 4 ->	Line 14: TOTAL EXPENDITU	RES IN THE PERIOD	31066

^{&#}x27; If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized bove. Page 4

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		Address	Purpose	Amount
*	3/21/2015	Long Ensien	S98 PEAKHAN ROOD	LOAN	370 57
*	3/25/2015	HOME MICHAEL ENSLEY	548 PESKHAN ROAD	LONA	254 56
*"	3/29/2615	MICHAEL EXSLEY	598 PEAKHAN DURA	LOAU	5585
		* SEE CRIGINAL FILING EXPENSES			
		K' SEE EXPENSES			
		Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	ING LIABILITIES (ALL)	68098