

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

15 APR 21 PH 4: 27

Fi	le with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election 30 day after election	year-end report dissolution
Sandra & Cristo Sandra &	Carrie Acres 10
Candidate Full Name (if applicable)	Chesto Committee.
	0
Selectman Office Sought and District Name	Papalardo
	of Committee Treasurer
2 Cristo Lane 2 Crist	o Rane
Residential Address Com	mittee Mailing Address
Telephone Number (optional):	
SUMMARY BALANCE INFORMATION:	
SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	.51
Line 2: Total receipts this period (page 3, line 11)	10.00
Line 3: Subtotal (line 1 plus line 2)	7.51
Line 4: Total expenditures this period (page 5, line 14)	R. 68
Line 5: Ending Balance (line 3 minus line 4)	4.83
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: MILLBURY CREDIT UNIC	D N
Affidavit of Committee Treasurer:	
certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true an ctivity, including all contributions, loans, receipte, expenditures, disbursements, in-kind contributions and liabilities for this repinance activity of all persons acting under the authority or on behalf of this complittee in actordance with the requirements of N	orting period and represents the campaign
signed under the penalties of perjury: (Treasurer's sign	D. M/2-/-
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 tractivity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.C. incurred any liabilities nor made any expenditures on my behalf during this reporting period.	ne and complete statement of all campaign finance G.L. c. 55. I have not received any contributions,
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 finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements.	or this reporting period and represents the
isped upder the penalties of perjury: Sounding Q CALA to (Condidate's sign	Date: 4/20/16

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)
3/2/15	O. NORMAND AUDETTE 9 JUNIPER DRIVE MILLBURY	\$250.00	SOLF EMPLOYED
3/8/15	WILLIAM F. BOROWSKI 65 CANALST. APT. 324 MILL BURY	\$ 100.00	
3/1/15	COMMITTEE TO ELECT MICHAEL MOORE "MOMIN DR. MILLBURY	\$ 100.00	
2/05/15	JOHN K. DIRENZOUR 21 DAVIS ROAD MILLBURY	\$ 500.00	SELF EMPLOYED
2/28/15	PATRICK FOLEY 48 B WHEELER AVE HILL BURY	\$ 60.00	
3/6/15	STUART D. MULHAPE TOLD COMMON MILLBORY	\$ 100.00	
3/8/15	VARIEVE M. PAPALARDO 8 LAKEVEW RIAD MILLBORD	\$100.00	
4/2/15	DOUALD O. RAJOTTE 36 LINGUN AVEBUT	\$ 120.00	
3/11/15	RONARDE REHARD 23 PROSPECT ST.	B200.00	RETIRED
3/3/15	MILHAR H. WILLYIKS	\$ 150.00	
Line 9: Total Receip	ots over \$50 (or listed above)	\$ 1,680.00	
Line 10: Total Recei	pts \$50 and under* (not listed above)	\$2,260.00	
Line 11: TOTAL R	ECEIPTS IN THE PERIOD #	3940.00	Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
3/8/15	A+D PIZZA	60 ELM ST. MILLBURY MA	BREALFAST FUNDRAISEN	\$375.00
3/22/15	COMMITTE TO ELECT HEMPONICAL	7 MOMIN DRIVE MILLBURY, MADISAT	ATTEND FUNDRAISER	B/00.00
4/14/15	IBA PRIVISHO	19 RIVER ST- MILL BURY, MADE	PRINTING	\$ 141.64
3/19/15	MILL BURY POSTMASTER	119 ELM ST. MILLBURY NADIST	POSTAGE	\$117.60
4/20/15	MILLBORD	119 BM ST- MILLBURY, MA 0150)	POSTAGE	\$ 340,00
4/14/15	MILLBURY LIONS CLUB	MILLBURY, MA	5 Po 2502	\$ 160.00
3/10/15	Quick STOP PRINTING	340 SHRANDURYS	PRINTING	\$313.44
]	Line 12: Expenditures over \$50 ((or listed above)	1,697.68
	I	Line 13: Expenditures \$50 and ur	nder* (not listed above)	155.00
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD [1852.66] 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 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)	9
	Line 16: In-Kind Contributions \$50 & under (not listed above)			0
	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			0

^{*} 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
The second secon				
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)			0	