



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 19 P 12:53

Fill in dates: Reporting Period Beginning 01 01 2010 Ending 12 31 2010

Type of report: (Check one)  
 8th day preceding preliminary   
 8th day preceding election   
 30 day after election   
 year-end report   
 dissolution

RALPH P. BELMORE  
 Full Name of Candidate (if applicable)  
CONCILIOR, WARD 7  
 Office Sought and District  
124 Kosmas St.  
 Residential Address  
MARLBOROUGH, MA 01752  
 Tel. No. (optional)

Committee To Elect - RALPH BELMORE  
 Committee Name  
JANET E. BELMORE  
 Name of Committee Treasurer  
124 Kosmas St.  
 Committee Mailing Address  
MARLBOROUGH, MA 01752  
 Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report \$ 6.27  
 Line 2: Total receipts this period (page 2, line 11) \$ 1.00  
 Line 3: Subtotal (line 1 plus line 2) \$ 7.27  
 Line 4: Total expenditures this period (page 3, line 14) \$ —  
 Line 5: Ending balance (line 3 minus line 4) \$ —  
 Line 6: Total in-kind contributions this period (page 4) \$ —  
 Line 7: Total (all) outstanding liabilities (page 4) \$ —  
 Line 8: Name of bank(s) used MARLBOROUGH SAVINGS BANK

**Affidavit of Committee Treasurer:**  
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, 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.  
Janet E. Belmore Signed under the penalties of perjury: 1/19/2011  
 Treasurer's signature (in ink) Date

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

**Affidavit of Candidate: (check 1 box only)**  
 Candidate with Committee and no activity independent of the committee  
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.  
 Candidate without Committee OR Candidate with independent activity filing separate report  
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  
Ralph P. Belmore Signed under the penalties of perjury: 01/19/2011  
 Candidate signature (in ink) Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
8/2/10	BANK DEPOSIT SELF FUNDED	1	00	
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>			100	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 C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

**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			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	0



# Form CPF M 102: Campaign Finance Report

## Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with: City or Town Clerk or Election Commission Please print or type all information, except signatures.

2011 JAN 20 P 4:24

**Fill in dates:**

Reporting Period Beginning 1 <sup>Month</sup> 20 <sup>Date</sup> 2010 <sup>Year</sup> Ending 12 <sup>Month</sup> 31 <sup>Date</sup> 2010 <sup>Year</sup> *new*

**Type of report: (Check one)**

8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

Michelle Balin-Hettinger  
Full Name of Candidate (if applicable)

School Committee  
Office Sought and District

279 Robert Rd  
Residential Address

Marlborough  
Tel. No. (optional)

Committee to elect Michelle Balin-Hettinger  
Committee Name

Lisa Podoloff Boles  
Name of Committee Treasurer

6 Stearns Rd, Marlborough  
Committee Mailing Address

Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report \$ 600.26

Line 2: Total receipts this period (page 2, line 11) \$ \_\_\_\_\_

Line 3: Subtotal (line 1 plus line 2) \$ \_\_\_\_\_

Line 4: Total expenditures this period (page 3, line 14) \$ \_\_\_\_\_

Line 5: Ending balance (line 3 minus line 4) \$ 600.26

---

Line 6: Total in-kind contributions this period (page 4) \$ \_\_\_\_\_

Line 7: Total (all) outstanding liabilities (page 4) \$ 1,000

Line 8: Name of bank(s) used St Mary's Credit Union

**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.

Lisa Podoloff Boles Signed under the penalties of perjury: 1/18/11

Treasurer's signature (in ink) Date

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

**Affidavit of Candidate: (check 1 box only)**

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Michelle B. Balin-Hettinger Signed under the penalties of perjury: 1/20/11

Candidate signature (in ink) Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>				Enter on page 1, line 2
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>				

\* 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 C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

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

**SCHEDULE D: LIABILITIES**

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
8/8/05	Michelle Robin-Hettinger	279 Robert Rd Marlborough,	loan for campaign expenses	\$1,000
Enter on page 1, line 7			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	\$1,000



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CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 13 A 9:29

**Fill in dates:**  
 Reporting Period Beginning Jan <sup>Month</sup> 1 <sup>Date</sup> 2010 <sup>Year</sup> Ending Dec <sup>Month</sup> 31 <sup>Date</sup> 2010 <sup>Year</sup>

**Type of report: (Check one)**  
 8th day preceding preliminary     8th day preceding election     30 day after election     year-end report     dissolution

Jen Boudrie  
 Full Name of Candidate (if applicable)

City Council ward 7  
 Office Sought and District

95 GRACE CIRCLE  
 Residential Address

7508-481-0569 Tel. No. (optional)

\_\_\_\_\_  
 Committee Name

\_\_\_\_\_  
 Name of Committee Treasurer

\_\_\_\_\_  
 Committee Mailing Address

\_\_\_\_\_  
 Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report \$ 0

Line 2: Total receipts this period (page 2, line 11) \$ 0

Line 3: Subtotal (line 1 plus line 2) \$ 0

Line 4: Total expenditures this period (page 3, line 14) \$ 0

Line 5: Ending balance (line 3 minus line 4) \$ 0

-----

Line 6: Total in-kind contributions this period (page 4) \$ 0

Line 7: Total (all) outstanding liabilities (page 4) \$ 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 knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  
 Signed under the penalties of perjury:

Treasurer's signature (in ink) \_\_\_\_\_ Date \_\_\_\_\_

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

**Affidavit of Candidate: (check 1 box only)**  
 Candidate with Committee and no activity independent of the committee  
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.  
 Candidate without Committee OR Candidate with Independent activity filing separate report  
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  
 Signed under the penalties of perjury:

J Boudrie  
 Candidate signature (in ink) \_\_\_\_\_ Date 1/10/2011





**SCHEDULE C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
<b>Line 15: In-kind over \$50</b>				
<b>Line 16: In-kind \$50 and under</b>				
<b>Line 17: Total In-kind</b>				00.00

Enter on page 1, line 6

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

**SCHEDULE D: LIABILITIES**

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>				00.00

Enter on page 1, line 7



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

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CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:  
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 20 P 1:17

Fill in dates:  
Reporting Period Beginning Month 1 Date 1 Year 10 Ending Month 12 Date 31 Year 10

Type of report: (Check one)

8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

PAUL E BRODEUR

Full Name of Candidate (if applicable)

Ward 3 Councilor - Marlboro

Office Sought and District

41 HAYDEN ST MARLBORO MA

Residential Address

Tel. No. (optional)

Committee to Elect Paul Brodeur

Committee Name

DENISE BRODEUR

Name of Committee Treasurer

41 HAYDEN ST MARLBORO

Committee Mailing Address

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>50</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>0</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>50</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>50</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>0</u>
Line 6: Total in-kind contributions this period (page 4)	\$ _____
Line 7: Total (all) outstanding liabilities (page 4)	\$ _____
Line 8: Name of bank(s) used	<u>CITIZENS BANK MARLBORO</u>

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 (in ink)

Date

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

Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>				Enter on page 1, line 2
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>				

\* 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 C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

**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			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	0



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 11 P 1:23

**Fill in dates:**

Reporting Period Beginning	Month	Date	Year	Ending	Month	Date	Year
	1	1	2010		12	31	2010

**Type of report: (Check one)**

8th day preceding preliminary  
  8th day preceding election  
  30 day after election  
  year-end report  
  dissolution

Edward J. Clancy

Full Name of Candidate (if applicable)

City Council Ward 6

Office Sought and District

106 Old Charter Rd. Marlborough

Residential Address

508-481-0411

Tel. No. (optional)

Committee to Elect Edward Clancy

Committee Name

Thomas Clancy

Name of Committee Treasurer

106 Old Charter Rd. Marlborough

Committee Mailing Address

508-481-0411

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$	— 0 —
Line 2: Total receipts this period (page 2, line 11)	\$	— 0 —
Line 3: Subtotal (line 1 plus line 2)	\$	— 0 —
Line 4: Total expenditures this period (page 3, line 14)	\$	— 0 —
Line 5: Ending balance (line 3 minus line 4)	\$	— 0 —
Line 6: Total in-kind contributions this period (page 4)	\$	— 0 —
Line 7: Total (all) outstanding liabilities (page 4)	\$	4462.43
Line 8: Name of bank(s) used		

**Affidavit of Committee Treasurer:**

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Thomas Clancy

Date

1-5-2011

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

**Affidavit of Candidate: (check 1 box only)**

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Edward Clancy

Date

1-5-2011

**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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>				Enter on page 1, line 2
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>				

\* 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 C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

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

**SCHEDULE D: LIABILITIES**

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
9/01/2001 12/31/2010	Edward J. Clancy	106 Old Charter Rd, Marlborough MA 01752	Campaign Expense	\$ 4462 <sup>43</sup>
Enter on page 1, line 7			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	\$4462 <sup>43</sup>



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

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 24 P 3:53

**Fill in dates:**  
Reporting Period Beginning January 01 2010 Ending December 31 2010

**Type of report: (Check one)**  
 8th day preceding preliminary   
 8th day preceding election   
 30 day after election   
 year-end report   
 dissolution

Joseph Paul Richard Luke Collins  
Full Name of Candidate (if applicable)  
Mayor  
Office Sought and District  
15 Redbud Way #21  
Residential Address  
Marlborough, MA 01752  
Tel. No. (optional) 508-251-1326

Committee to elect Joseph Collins  
Committee Name  
Carla A. Loreda  
Name of Committee Treasurer  
15 Redbud Way #21  
Committee Mailing Address  
Marlborough, MA 01752  
Tel. No. (optional) 508-251-1326

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report      \$ 5.00  
Line 2: Total receipts this period (page 2, line 11)      \$ 0  
Line 3: Subtotal (line 1 plus line 2)      \$ 5.00  
Line 4: Total expenditures this period (page 3, line 14)      \$ 0  
Line 5: Ending balance (line 3 minus line 4)      \$ 5.00

-----  
Line 6: Total in-kind contributions this period (page 4)      \$ N/A  
Line 7: Total (all) outstanding liabilities (page 4)      \$ 1029.59  
Line 8: Name of bank(s) used Digital Federal Credit Union

**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 (in ink)      Date 1/24/11

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

**Affidavit of Candidate: (check 1 box only)**  
 Candidate with Committee and no activity independent of the committee  
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.  
 Candidate without Committee OR  Candidate with independent activity filing separate report  
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  
Signed under the penalties of perjury: \_\_\_\_\_  
Candidate signature (in ink)      Date 1/24/2011

**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.*

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>		Ø	ØØ	
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>		Ø	ØØ	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		Ø	ØØ	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 C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-kind over \$50				0
Line 16: In-kind \$50 and under				0
Line 17: Total In-kind				0

Enter on page 1, line 6

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

**SCHEDULE D: LIABILITIES**

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
8/26/09	Collins, Joseph P	15 Redbvd Way #21 Marlborough, MA 01752	Parade Banner	611.04
10/7/09	Collins, Joseph P	15 Redbvd Way #21 Marlborough, MA 01752	Yard Signs	418.55
Line 18: OUTSTANDING LIABILITIES (ALL)				1029.59

Enter on page 1, line 7



Commonwealth of Massachusetts

# Form CPF D 102 : Campaign Finance Report Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with: District

Office of Campaign and Political Finance  
One Ashburton Place  
Boston, MA 02108  
(617) 727-8332

2011 JAN 20 P 2:54  
CPF ID#

Please print or type all information, except signatures.

Fill in dates:  
 Reporting Period Beginning 1 20 2010 Ending 12 31 2010

Type of report: (Check one)  
 Initial Report  Year-end Report  Dissolution Report  Other

Joseph F. Delano, JR  
 Full Name of Candidate  
MARLBOROUGH  
 Office Sought/District  
10 HARPER Circle  
 Residential Address  
229-0124  
 Tel. No. (optional)

Committee to Elect Joe Delano  
 Committee Name  
Lisa Delano  
 Name of Committee Treasurer  
10 HARPER Circle  
 Committee Mailing Address  
 Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report	\$ <u>797.-</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>0</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>797.-</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>0</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>797.-</u>
Line 6: Total in-kind contributions this period (page 3)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>0</u>
Line 8: Name of bank(s) used	<u>St. Mary's Credit Union</u>

**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:  
Lisa Delano  
 Treasurer's signature (in ink) 1/20/11  
Date

**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, and attached schedules, and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.  
 Candidate without committee OR Candidate with independent activity filing separate report  
 I certify that I have examined this report 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:  
[Signature]  
 Candidate signature (in ink) 1/20/11  
Date

**SCHEDULE A: RECEIPTS**

**INITIAL REPORT:** Report any receipts received before appointing the depository bank

**OTHER REPORTS:** You may omit schedule A information, as this has previously been disclosed on the reports filed by your depository bank. However, you must summarize your receipts on lines 9 - 11.

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.*

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
<b>Line 9: Total receipts in excess of \$50</b>				Enter on page 1, line 2.
<b>Line 10: Total receipts \$50 and under</b>				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>				

**SAVINGS ACCOUNT INFORMATION**

Are there any campaign funds on deposit in savings accounts/CDs etc.?  No (go to page 3)  Yes

If yes, complete the following:

Name(s) of Bank(s) and/or CDs

Amount in account/CD etc.

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**SAVINGS ACCOUNT/CD TOTAL:** \$ \_\_\_\_\_

All funds held in savings accounts, CDs etc. should be included in line 5, (ending balance) on page 1.

**SCHEDULE B: EXPENDITURES**

**INITIAL REPORT:** Report any expenditures made before appointing the depository bank.

**OTHER REPORTS:** You may omit schedule B information, as this has previously been disclosed on the reports filed by your depository bank. However, you must summarize your expenditures on lines 12 - 14.

*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.*

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
			Line 12: Expenditures over \$50	
			Line 13: Expenditures \$50 and under	
			Line 14: <b>TOTAL EXPENDITURES</b>	

Enter on page 1, line 4

**SCHEDULE C: "IN-KIND" CONTRIBUTIONS**

In-kind contributions are not reported by a depository bank. You must report all in-kind contributions for the reporting period on this form (or attached sheets). Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: <b>Total In-kind</b>	

Enter on page 1, line 6

\* 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 contributor has given an aggregate amount of \$200 or more in a calendar year, the contributor's occupation and employer must also be reported.

This page may be copied if additional pages are required to report all expenditures or all in-kind contributions. Please include your committee name, CPF ID# and a page number on each page.

**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.*

<b>Date Incurred</b>	<b>To Whom Due</b>	<b>Address</b>	<b>Purpose</b>	<b>Amount</b>
Enter on page 1, line 7.		<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>		

**SCHEDULE E: DISCLOSURE OF ASSETS STATEMENT**

All candidates and committees must fill in part A or part B.

**Part A:**

No assets\* were acquired or disposed of by this candidate/committee during the period covered by this statement.

**Part B:**

Assets acquired: List all assets acquired since the committee last filed this statement. If this is the first Schedule E you have filed, list all assets.

<b>Asset</b> <small>Include year, model or other identifying information, if applicable.</small>	<b>Date Acquired</b>	<b>Present Location</b>	<b>Manner Acquired</b>	<b>Cost/Value</b>

Assets disposed of: List all assets sold, traded or transferred during the reporting period covered by this statement.

<b>Asset</b> <small>Include year, model or other identifying information, if applicable.</small>	<b>Date Acquired</b>	<b>Disposition to: Name and Address</b>	<b>Date and Manner of Disposition</b>	<b>Disposition Value</b> <small>Attach statement of how value is determined.</small>

Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.

\* An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.

This page may be copied if additional pages are required to report all liabilities or assets. Please include your committee name, CPF ID# and a page number on each page.





# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with: City or Town Clerk or Election Commission Please print or type all information, except signatures.

2011 JAN 20 P 4:19

Fill in dates: Reporting Period Beginning Month JAN Day 10 Year 2010 Ending Month Dec Day 31 Year 2010 (MS)

Type of report: (Check one)  
 8th day preceding preliminary  8th day preceding election  30 day after election  Year-end report  dissolution

Margaret M. Sawyer  
 Full Name of Candidate (if applicable)  
School Committee  
 Office Sought and District  
33 Southhill Avenue  
 Residential Address  
Marbleboro MA  
 Tel. No. (optional)

Committee to Elect Margaret Sawyer  
 Committee Name  
Brenda Calder  
 Name of Committee Treasurer  
33 Southhill Avenue  
 Committee Mailing Address  
 Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report	\$ <u>209.37</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>-0-</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>209.37</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>-0-</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>209.37</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>-0-</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>3300.00</u>
Line 8: Name of bank(s) used	

**Affidavit of Committee Treasurer:**  
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all 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.  
Brenda Calder Signed under the penalties of perjury: 1/20/2011  
 Treasurer's signature (in ink) Date

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

**Affidavit of Candidate: (check 1 box only)**  
 Candidate with Committee and no activity independent of the committee  
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.  
 Candidate without Committee OR Candidate with independent activity filing separate report  
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  
Margaret Sawyer Signed under the penalties of perjury: Jan 19 2011  
 Candidate signature (in ink) Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>				
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		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 C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

**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
Oct 2007	Margaret Sawyer	33 Spoonhill Ave	Personal loan	\$300 <sup>00</sup>
Enter on page 1, line 7				<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b> 3300 <sup>00</sup>





Commonwealth of Massachusetts

Form CPF M T 101 : CHANGE OF TREASURER; ACCEPTANCE OF OFFICE BY TREASURER MUNICIPAL FORM Office of Campaign and Political Finance

RECEIVED CITY CLERK'S OFFICE CITY OF MARLBOROUGH

2011 JAN 20 P 12:33

File with: City or Town Clerk or Election Commission

Please print or type all information, except signatures

1. Committee Name: Comitee to elect Matthew Elder

2. New Treasurer: Meredith Swift

2a. Treasurer's Address: 8 Springhill Rd Framingham MA 01701 508-405-0182 Tel. No.

3. Committee Address: (If different)

I hereby accept the office of treasurer of the above-named committee. I understand that I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election. I am aware that an appointed public employee may not serve as treasurer of a political committee and that a candidate or elected official may not serve as the treasurer of a political action committee except as authorized by M.G.L. c. 55, s. 5A.

SIGNED UNDER THE PENALTIES OF PERJURY:

Meredith Swift 1/20/11 Treasurer's signature Date

FOR CANDIDATE COMMITTEES ONLY

I hereby consent to the appointment of the new treasurer of this committee.

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature] 1/20/11 Candidate's signature Date

SELECTED EXTRACTS FROM M.G.L. c. 55

Section 3 requires the director to "assess a civil penalty for any [late filed] report ... of ten dollars per day... [up to \$2,500]. In the case of failure to file by a candidate or a candidate's committee, the civil penalty shall be assessed against the candidate; and in all other instances, the civil penalty shall be assessed against the treasurer of a political committee....

Section 5 outlines statements of organization of political committees: ....Any change in information previously submitted in a statement of organization shall be reported to the director, or if organized for the purpose of a city or town election only, to the city or town clerk, within ten days following the change.

Each political committee shall have a treasurer who shall qualify for his office by filing a written acceptance thereof with the director, or if organized for the purpose of a city or town election only, with the city or town clerk. Said treasurer shall remain subject to all the duties and liabilities imposed by this chapter until his written resignation of the office is received or his successor's written acceptance is filed as aforesaid. No person acting under the authority of, or on behalf of, any political committee shall receive any money or anything of value, or expend or disburse the same, or incur expenses while it has no treasurer qualified as aforesaid, or while the name and address of any of its officers or members, as originally or subsequently chosen, is not filed in accordance with the provisions of this section or chapter 52, as the case may be.

Each treasurer of a political committee shall keep and preserve detailed accounts, vouchers and receipts as prescribed for a candidate by the provisions of section two. Each treasurer of a political committee shall keep said records for a period of six years following the date of the relevant election....

No expenditure shall be made for, or on behalf of, a political committee without the authorization of the chairman or treasurer, or their designated agents....



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:  
City or Town Clerk or Election Commission

2011 JAN 21 A 8:25

Please print or type all information, except signatures.

Fill in dates:  
Reporting Period Beginning 1 - 1 - 10 Ending 12 - 31 - 10

Type of report: (Check one)  
 8th day preceding preliminary  
 8th day preceding election  
 30 day after election  
 year-end report  
 dissolution

Paul R. Ferro  
Full Name of Candidate (if applicable)  
City Council - 12  
Office Sought and District  
52 Edinboro St.  
Residential Address  
Marlboro, MA 01752  
Tel. No. (optional)

Friends of Paul Ferro  
Committee Name  
Christine Ferro  
Name of Committee Treasurer  
P.O. Box 737  
Committee Mailing Address  
Marlboro, MA 01752  
Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 6.53  
Line 2: Total receipts this period (page 2, line 11) \$ 0.  
Line 3: Subtotal (line 1 plus line 2) \$ 6.53  
Line 4: Total expenditures this period (page 3, line 14) \$ 6.20  
Line 5: Ending balance (line 3 minus line 4) \$ 0.33  
-----  
Line 6: Total in-kind contributions this period (page 4) \$ 0.  
Line 7: Total (all) outstanding liabilities (page 4) \$ 2,750.00  
Line 8: Name of bank(s) used Digital Credit Union

#### 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:

Christine Ferro  
Treasurer's signature (in ink)

1-20-11  
Date

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

#### Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Paul R. Ferro  
Candidate signature (in ink)

1/20/11  
Date





### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-kind over \$50				-0.
Line 16: In-kind \$50 and under				-0.
Line 17: Total In-kind				-0.

Enter on page 1, line 6

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

### SCHEDULE D: LIABILITIES

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
10/07	Paul Ferris	57 B. ... st.	candidate loan	2,750
Line 18: OUTSTANDING LIABILITIES (ALL)				2,750

Enter on page 1, line 7



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 13 A 9:29

**Fill in dates:**

Reporting Period Beginning <sup>Month</sup> 1 <sup>Date</sup> 20 <sup>Year</sup> 2010 Ending <sup>Month</sup> 12 <sup>Date</sup> 31 <sup>Year</sup> 2010

**Type of report: (Check one)**

8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

Jennifer Harley  
Full Name of Candidate (if applicable)  
School Committee  
Office Sought and District  
115 Union St  
Residential Address  
(508) 303-8826  
Tel. No. (optional)

none  
Committee Name  
\_\_\_\_\_  
Name of Committee Treasurer  
\_\_\_\_\_  
Committee Mailing Address  
\_\_\_\_\_  
Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report	\$ <u>-270-</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>0</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>-270</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>0</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>-270</u>
-----	
Line 6: Total in-kind contributions this period (page 4)	\$ _____
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>270</u>
Line 8: Name of bank(s) used	_____

**Affidavit of Committee Treasurer:**

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date

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

**Affidavit of Candidate: (check 1 box only)**

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>				Enter on page 1, line 2
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>				

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

**Page 2**



**SCHEDULE C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

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

**SCHEDULE D: LIABILITIES**

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
8/29/99	Jennifer Hardy	115 Union St Marlborough	Campaign Signs	270-
Enter on page 1, line 7			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	270-



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 20 A 11:34

**Fill in dates:**

Reporting Period Beginning Jan 01, 2010 Ending Dec 31, 2010

**Type of report: (Check one)**

8th day preceding preliminary  8th day preceding election  30 day after election  Year-end report  dissolution

Mark E. Hediger  
Full Name of Candidate (if applicable)  
School Committee - Marlborough  
Office Sought and District  
418 Stearns Road, Marlborough  
Residential Address  
Tel. No. (optional)

The Hediger Committee  
Committee Name  
Theresa L. Hediger  
Name of Committee Treasurer  
418 Stearns Road  
Committee Mailing Address  
Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report \$ <2289.17>  
Line 2: Total receipts this period (page 2, line 11) \$ 0.00  
Line 3: Subtotal (line 1 plus line 2) \$ <2289.17>  
Line 4: Total expenditures this period (page 3, line 14) \$ 0.00  
Line 5: Ending balance (line 3 minus line 4) \$ <2289.17>  
Line 6: Total in-kind contributions this period (page 4) \$ —  
Line 7: Total (all) outstanding liabilities (page 4) \* \$ <7076.67>  
Line 8: Name of bank(s) used Marlborough Savings Bank

**Affidavit of Committee Treasurer:**

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, 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.

Theresa L. Hediger Signed under the penalties of perjury: 1-20-11  
Treasurer's signature (in ink) Date

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

**Affidavit of Candidate: (check 1 box only)**

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Mark E. Hediger Signed under the penalties of perjury: 20 Jan '11  
Candidate signature (in ink) Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
	None			
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>				

— 000 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.*

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
	None				
				Line 12: Expenditures over \$50	
				Line 13: Expenditures \$50 and under*	
				Line 14: TOTAL EXPENDITURES	

Enter on page 1, line 4

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

**SCHEDULE C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	<i>Name</i>			
Line 15: In-kind over \$50				<i>-0.00</i>
Line 16: In-kind \$50 and under				<i>-0.00</i>
Line 17: Total In-kind				<i>-0.00</i>

Enter on page 1, line 6

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

**SCHEDULE D: LIABILITIES**

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
<i>9/24/03</i>	<i>Mark E. Hediger</i>	<i>418 Stearns Rd</i>	<i>Stickers</i>	<i>1667.67</i>
<i>9/25/03</i>	↓	↓	↓	<i>1500.00</i>
<i>9/17/05</i>	↓	↓	↓	<i>700.00</i>
<i>10/15/06</i>	<i>Mark E. Hediger</i>	<i>418 Stearns Rd</i>	<i>Votes Stickers</i>	<i>160.00</i>
Line 18: OUTSTANDING LIABILITIES (ALL)				<i>7076.67</i>

Enter on page 1, line 7





# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth  
of Massachusetts

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

Fill in date: JAN 24 10 51  
Reporting Period Beginning 1 21 10 Ending 12 31 10

Type of report: (Check one)

8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

ROBERT G. KATZ

Full Name of Candidate (if applicable)

CITY COUNCILOR - WARD 1 (FORMER)

Office Sought and District

256 LITTLEFIELD LN

Residential Address

MARLBOROUGH, MA 01752

Tel. No. (optional)

COMMITTEE TO ELECT ROBERT KATZ  
WARD 1 - CITY COUNCILOR

Committee Name

ANDREA S. KATZ

Name of Committee Treasurer

256 LITTLEFIELD LN

Committee Mailing Address

MARLBOROUGH, MA 01752

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 16.65  
 Line 2: Total receipts this period (page 2, line 11) \$ #  
 Line 3: Subtotal (line 1 plus line 2) \$ 16.65  
 Line 4: Total expenditures this period (page 3, line 14) \$ ~  
 Line 5: Ending balance (line 3 minus line 4) \$ 16.65  
 Line 6: Total in-kind contributions this period (page 4) \$ #  
 Line 7: Total (all) outstanding liabilities (page 4) \$ #  
 Line 8: Name of bank(s) used ST. MARY'S CREDIT UNION

#### 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:

Andrea Katz  
Treasurer's signature (in ink)

1/20/11  
Date

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

#### Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Robert Katz  
Candidate signature (in ink)

1/20/11  
Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>				
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		4	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 C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

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

**SCHEDULE D: LIABILITIES**

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	H



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report  
Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH  
2011 JAN 20 P 12:21

File with:  
City or Town Clerk or Election Commission

1/12/2011

Reporting Period - Beginning: 8/14/2010 Ending: 12/31/2010

Type of report: Year-end

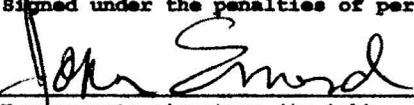
<b>Steven Kerrigan</b> <i>Full Name of Candidate</i>	<b>The Friends of Steven Kerrigan</b> <i>Committee Name</i>
<b>Ward 4 Councilor</b> <i>Office Sought/ District</i>	<b>John Edmond</b> <i>Name of Committee Treasurer</i>
<b>131 Bigelow St Marlborough, MA 01752</b> <i>Residential Address</i>	<b>131 Bigelow St Marlborough, MA 01752</b> <i>Committee Address</i>

**SUMMARY BALANCE INFORMATION**

Ending Balance from previous report:	\$5.00
Total receipts this period:	\$0.00
Subtotal:	\$5.00
Total expenditures this period:	\$0.00
Ending Balance:	\$5.00
Total in-kind contributions this period:	\$0.00
Total outstanding liabilities:	\$0.00
Name of bank(s) used:	Avidia 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:

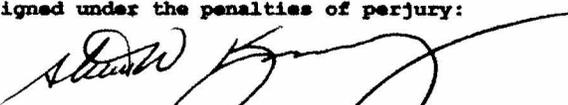
 1/19/11  
Treasurer's signature (in ink) Date

**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, and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

**Candidate without Committee OR candidate with independent activity filing separate report.**  
I certify that I have examined this report and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity including contributions, loans, receipts, expenditures, disbursements, 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:

 1/19/11

## 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.

Date	Name and Residential Address	Amount	Occupation and Employe
	Total Itemized Receipts	\$0.00	
	Total Unitemized Receipts	\$0.00	
	Total Receipts	\$0.00	

## Schedule B: Expenditures

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
	Total Itemized Expenditures	\$0.00	
	Total Unitemized Expenditures	\$0.00	
	Total Expenditures	\$0.00	

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

Date	Name and Residential Address	Value	Description Occupation/Employer
	Total Itemized In-kind Contributions	\$0.00	
	Total Unitemized In-kind Contributions	\$0.00	
	Total In-kind Contributions	\$0.00	

### Schedule D: Liabilities

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as the liabilities incurred during this reporting period.

Date	To Whom Due	Amount	Purpose
	Total Outstanding Liabilities	\$0.00	



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with: City or Town Clerk or Election Commission Please print or type all information, except signatures.

2011 JAN 19 P 3:03

**Fill in dates:**

Reporting Period Beginning	Month	Date	Year	Ending	Month	Date	Year
	1	1	10		12	31	10

**Type of report: (Check one)**

8th day preceding preliminary  
 8th day preceding election  
 30 day after election  
 year-end report  
 dissolution

Donald R. Landers  
Full Name of Candidate (if applicable)

City Councilor - Ward 7  
Office Sought and District

84 Crosby Rd, Marlboro, MA 01752  
Residential Address

508 485-9141  
Tel. No. (optional)

Committee to elect Don Landers  
Committee Name

Janet Landers  
Name of Committee Treasurer

84 Crosby Rd, Marlboro MA 01752  
Committee Mailing Address

508-485-9141  
Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report	\$ -0-
Line 2: Total receipts this period (page 2, line 11)	\$ -0-
Line 3: Subtotal (line 1 plus line 2)	\$ -0-
Line 4: Total expenditures this period (page 3, line 14)	\$ -0-
Line 5: Ending balance (line 3 minus line 4)	\$ -0-
Line 6: Total in-kind contributions this period (page 4)	\$ -0-
Line 7: Total (all) outstanding liabilities (page 4)	\$ -0-
Line 8: Name of bank(s) used	<u>St. Mary's Credit Union</u>

**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.

Janet Landers Signed under the penalties of perjury: \_\_\_\_\_  
Treasurer's signature (in ink) Date

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

**Affidavit of Candidate: (check 1 box only)**

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Janet Landers Signed under the penalties of perjury: \_\_\_\_\_  
Candidate signature (in ink) Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>		-0-		
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>		-0-		
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		-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 C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

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

**SCHEDULE D: LIABILITIES**

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	<b>- 0 -</b>



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 20 A 9:27

Fill in dates:  
Reporting Period Beginning 01 20 2010 Ending 12 31 2010

Type of report: (Check one)  
 8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

J. Michael Mc Gorty

Full Name of Candidate (if applicable)

City Councilor - At-Large

Office Sought and District

73 Hutchinson Dr. Marlborough MA

Residential Address

508-481-3564

Tel. No. (optional)

Mc Gorty for Councilor

Committee Name

Anna Mc Gorty

Name of Committee Treasurer

73 Hutchinson Dr.

Committee Mailing Address

Marlborough, MA 01752

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>213.98</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>300.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>513.98</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>500.00</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>13.98</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>-0-</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>182.25</u>
Line 8: Name of bank(s) used	<u>CITIZEN'S BANK</u>

#### 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.

Anna Mc Gorty  
Treasurer's signature (in ink)

Signed under the penalties of perjury:

1/20/11  
Date

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

#### Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

[Signature]  
Candidate signature (in ink)

Signed under the penalties of perjury:

1/20/11  
Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
4/14/10	J. MICHAEL McBERTY 73 HITCHCOCK DR. MIDDLESEX CO. MA	\$300	00	MANAGER MIDDLESEX SHERIFF'S OFFICE
Line 9: Total receipts in excess of \$50 (or listed above)		\$300	00	
Line 10: Total receipts \$50 and under* (not listed above)				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		\$300	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.  
 Page 2

**SCHEDULE B: EXPENDITURES**

*M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.*

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
5/5/10	Metowest Printing	160 Main St Methuen MA	Printing	\$ 500.	00
Line 12: Expenditures over \$50				\$ 500.	00
Line 13: Expenditures \$50 and under*					
<b>Line 14: TOTAL EXPENDITURES</b>				\$ 500.	00

Enter on page 1, line 4

\*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.

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

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

**SCHEDULE D: LIABILITIES**

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
5/5/10	Metrowest Printing	160 Main St Mansfield MA	Printing	\$182.25
Enter on page 1, line 7				Line 18: OUTSTANDING LIABILITIES (ALL) \$182.25



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 19 A 10 20

**Fill in dates:**

Reporting Period Beginning January 1 <sup>Month</sup> <sup>Date</sup> <sup>Year</sup> 2010 Ending December 31 <sup>Month</sup> <sup>Date</sup> <sup>Year</sup> 2010

**Type of report: (Check one)**

8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

Sean Navin

Full Name of Candidate (if applicable)

Marlboro Councilor-At-Large

Office Sought and District

236 A Bolton St. Marlboro, MA

Residential Address

Tel. No. (optional)

Committee to Elect Sean Navin

Committee Name

Joseph Navin

Name of Committee Treasurer

154 Warridge Rd. Marlboro, MA

Committee Mailing Address

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>742.30</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>0</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>742.30</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>0</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>742.30</u>
-----	
Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>1,000.00</u>
Line 8: Name of bank(s) used	<u>Marlborough Savings</u>

**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:

Joseph M. Navin  
Treasurer's signature (in ink)

1/18/2011  
Date

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

**Affidavit of Candidate: (check 1 box only)**

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee  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:

Sean Navin  
Candidate signature (in ink)

1/18/2011  
Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>		0		
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>		0		
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		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.

**Page 2**



**SCHEDULE C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-kind over \$50				0
Line 16: In-kind \$50 and under				0
Line 17: Total In-kind				0

Enter on page 1, line 6

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

**SCHEDULE D: LIABILITIES**

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
11/2/2007	Sean Navin (Loan)	236A Botton St. Marlborough, MA	Loan from Candidate	\$1,000.00
Line 18: OUTSTANDING LIABILITIES (ALL)				\$1,000.00

Enter on page 1, line 7



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report

## Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 24 P 5:59

Fill in dates: Reporting Period Beginning January 1 2010 Ending December 31 2010

Type of report: (Check one)  
 8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

Mark A. Oram  
Full Name of Candidate (if applicable)

MA  
Office Sought and District  
108 Upland Road  
Residential Address  
Marlborough MA 01752  
Tel. No. (optional)

Oram Campaign Committee  
Committee Name

Mark E. Flonis  
Name of Committee Treasurer  
61 Woodland Road  
Committee Mailing Address  
Halden MA 01520  
Tel. No. (optional)  
508.829.9141

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$	<u>79.50</u>
Line 2: Total receipts this period (page 2, line 11)	\$	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	\$	<u>79.50</u>
Line 4: Total expenditures this period (page 3, line 14)	\$	<u>0</u>
Line 5: Ending balance (line 3 minus line 4)	\$	<u>79.50</u>
-----		
Line 6: Total in-kind contributions this period (page 4)	\$	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$	<u>10071.06</u>
Line 8: Name of bank(s) used		<u>St. Mary's Credit Union</u>

#### 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.

[Signature] Signed under the penalties of perjury: 1/20/11  
Treasurer's signature (in ink) Date

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

#### Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

[Signature] Signed under the penalties of perjury: 01-24-11  
Candidate signature (in ink) Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>		0		
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>		0		
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		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.  
**Page 2**



**SCHEDULE C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

**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	
11/197 - 12/31/02	Mark A. Oram	108 Opland Road Marlborough MA	Loans to Campaign	8568.87	
1/1 - 10/26 2009	Mark A. Oram	" " "	" " "	1502.19	
Enter on page 1, line 7				Line 18: OUTSTANDING LIABILITIES (ALL)	10071.06



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 10 P 12: 54

**Fill in dates:**

Reporting Period Beginning Month JAN Date 1 Year 2010 Ending Month DEC Date 31 Year 2010

**Type of report: (Check one)**

8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

MICHAEL H. OSSING

Full Name of Candidate (if applicable)

COUNCILOR AT LARGE

Office Sought and District

43 VARLEY ROAD

Residential Address

MARLBORO, MA 01752

Tel. No. (optional)

508-481-6189

N/A

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 0

Line 2: Total receipts this period (page 2, line 11) \$ 0

Line 3: Subtotal (line 1 plus line 2) \$ 0

Line 4: Total expenditures this period (page 3, line 14) \$ 0

Line 5: Ending balance (line 3 minus line 4) \$ 0

Line 6: Total in-kind contributions this period (page 4) \$ 0

Line 7: Total (all) outstanding liabilities (page 4) \$ 0

Line 8: Name of bank(s) used CENTRAL ONE FEDERAL CREDIT UNION

**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.

N/A

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date

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

**Affidavit of Candidate: (check 1 box only)**

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

[Signature]

Candidate signature (in ink)

Date

1-9-11

**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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
	N/A			
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>				
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		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.*

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
	N/A				
			Line 12: Expenditures over \$50		
			Line 13: Expenditures \$50 and under*		
			<b>Line 14: TOTAL EXPENDITURES</b>	0	

Enter on page 1, line 4

\*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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	N/A			
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			<b>Line 17: Total In-kind</b>	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.

**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
	N/A			
Enter on page 1, line 7			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	0



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 10 P 2:25

**Fill in dates:**

Reporting Period Beginning 

Month	1	Date	1	Year	2010
-------	---	------	---	------	------

 Ending 

Month	12	Date	31	Year	2010
-------	----	------	----	------	------

**Type of report: (Check one)**

8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

Paul Polewacyk

Full Name of Candidate (if applicable)

Councilor at Large

Office Sought and District

28 Pleasant St

Residential Address

Tel. No. (optional)

None

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>1140.74</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>4.52</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>1145.26</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>0</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>1145.26</u>
-----	
Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>0</u>
Line 8: Name of bank(s) used	<u>St Mary's Credit Union</u>

**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 (in ink)

Date

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

**Affidavit of Candidate: (check 1 box only)**

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee **OR** Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date

1-10-11

**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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>				
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>				

000 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 C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

**SCHEDULE D: LIABILITIES**

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	0



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report  
Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

2011 JAN 20 A 9 27

File with:  
City or Town Clerk or Election Commission

1/19/2011

Reporting Period - Beginning: 1/19/2010 Ending: ~~1/19/2011~~ 12/31/2010 *JP*

Type of report: Year-end

Patricia A. Pope

The Committee To Elect Patricia A. Pope

Full Name of Candidate

Committee Name

Councilor At Large

Kathryn M. Bagley

Office Sought/ District

Name of Committee Treasurer

114 Houde Street

15 Dickenson Way

Marlborough, MA 01752

Marlborough, MA 01752

Residential Address

Committee Address

SUMMARY BALANCE INFORMATION

Ending Balance from previous report:	\$707.75
Total receipts this period:	\$0.00
Subtotal:	\$707.75
Total expenditures this period:	\$0.00
Ending Balance:	\$707.75
<hr/>	
Total in-kind contributions this period:	\$0.00
Total outstanding liabilities:	\$1,740.00
Name of bank(s) used:	St Mary's Credit Union

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:

*Kathryn M. Bagley*  
Treasurer's signature (in ink)

*1/20/11*  
Date

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, and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR candidate with independent activity filing separate report.

I certify that I have examined this report and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity including contributions, loans, receipts, expenditures, disbursements, 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:

*Patricia A. Pope*

*1/20/11*

## 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.

Date	Name and Residential Address	Amount	Occupation and Employe
	Total Itemized Receipts	\$0.00	
	Total Unitemized Receipts	\$0.00	
	Total Receipts	\$0.00	

## Schedule B: Expenditures

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
	Total Itemized Expenditures	\$0.00	
	Total Unitemized Expenditures	\$0.00	
	Total Expenditures	\$0.00	

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

Date	Name and Residential Address	Value	Description Occupation/Employer
	Total Itemized In-kind Contributions	\$0.00	
	Total Unitemized In-kind Contributions	\$0.00	
	Total In-kind Contributions	\$0.00	

## Schedule D: Liabilities

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as the liabilities incurred during this reporting period.

Date	To Whom Due	Amount	Purpose
7/16/1997	Pope (Loan), Patricia A. 114 Houde Street Marlborough, MA 01752	\$40.00	Loan from candidate
8/15/1997	Pope (Loan), Patricia A. 114 Houde Street Marlborough, MA 01752	\$450.00	Loan from candidate
8/27/1997	Pope (Loan), Patricia A. 114 Houde Street Marlborough, MA 01752	\$50.00	Loan from candidate
9/15/1997	Pope (Loan), Patricia A. 114 Houde Street Marlborough, MA 01752	\$570.00	Loan from candidate
11/21/1997	Pope (Loan), Patricia A. 114 Houde Street Marlborough, MA 01752	\$130.00	Loan from candidate
10/2/2005	Pope (Loan), Patricia A. 114 Houde Street Marlborough, MA 01752	\$500.00	Loan from candidate
Total Outstanding Liabilities		\$1,740.00	



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with: City or Town Clerk or Election Commission Please print or type all information, except signatures.

2011 JAN 24 P 3:07

Fill in dates: Reporting Period Beginning Month 1 Date 2 Year 2010 Ending Month 12 Date 31 Year 2010

Type of report: (Check one)  
 8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

Kathleen Robey  
Full Name of Candidate (if applicable).  
School Committee - Marlborough  
Office Sought and District  
97 Hudson St, Marlborough  
Residential Address  
Tel. No. (optional)

Katie Robey Committee  
Committee Name  
Eric Baur  
Name of Committee Treasurer  
97 Hudson St, Marlborough  
Committee Mailing Address  
Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report	\$ <u>0</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>0</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>0</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>0</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>0</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>1,967.86</u>
Line 8: Name of bank(s) used	

**Affidavit of Committee Treasurer:**  
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all 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.  
Eric Baur Signed under the penalties of perjury: 1/19/2011  
Treasurer's signature (in ink) Date

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

**Affidavit of Candidate: (check 1 box only)**  
 Candidate with Committee and no activity independent of the committee  
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.  
 Candidate without Committee OR Candidate with independent activity filing separate report  
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  
Kathleen D. Robey Signed under the penalties of perjury: January 20, 2011  
Candidate signature (in ink) Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>				
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		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 C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

**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
8/15/95	Kathleen Robey	97 Hudson St.	loan	750.00
9/16/95	" "	" "	" "	89.80
9/22/99	" "	" "	" "	500.00
8/2002	" "	" "	" "	45.31
10/30/03	" "	" "	" "	79.79
9/30/07	" "	" "	" "	64.96
11/3/07	" "	" "	" "	438.00
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	1967.86



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 25 A 10:57

**Fill in dates:**

Reporting Period Beginning 01 20 10 Ending 01 22 11

**Type of report: (Check one)**

8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

SCOTT D SCHAPER

Full Name of Candidate (if applicable)

CITY COUNCIL WARD 3

Office Sought and District

15 MAUMBER LANE

Residential Address

508 485 2099

Tel. No. (optional)

Committee to elect Scott Schaper

Committee Name

Lisa Boles

Name of Committee Treasurer

6 Stearns Road

Committee Mailing Address

Marlborough MA 01752

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>0</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>0</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>0</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>0</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>0</u>
-----	
Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>3,260.31</u>
Line 8: Name of bank(s) used	<u>ST. MARY'S CREDIT UNION</u>

**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.

Lisa Boles  
Signed under the penalties of perjury:

Treasurer's signature (in ink)

1/20/11  
Date

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

**Affidavit of Candidate: (check 1 box only)**

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee  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.

Scott D Schaper  
Signed under the penalties of perjury:

Candidate signature (in ink)

1/20/11  
Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>		0	00	
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>		0	00	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		0	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 C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-kind over \$50				0
Line 16: In-kind \$50 and under				0
Line 17: Total In-kind				0

Enter on page 1, line 6

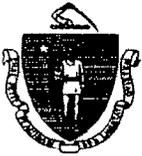
\* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

**SCHEDULE D: LIABILITIES**

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
Various	Scott D. Schaffer	15 MACOMBER LANE	Various loans to campaign 2003-2007	3,260.31
Line 18: OUTSTANDING LIABILITIES (ALL)				3,260.31

Enter on page 1, line 7



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with: City of Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/12/10 Ending Date: ~~1/12/10~~ 12/31/10

Type of Report: (Check one)

8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

Robert Seymour  
Candidate Full Name (if applicable)

Ward 5 City Councilor  
Office Sought and District

17 Kenney Lane Marlborough  
Residential Address

Telephone Number (optional):

Committee to Elect Robert Seymour  
Committee Name

Christine Seymour  
Name of Committee Treasurer

17 Kenney Lane Marlborough  
Committee Mailing Address

Telephone Number (optional):

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>1229.86</u>
Line 2: Total receipts this period (page 3, line 11)	<u>N/A</u>
Line 3: Subtotal (line 1 plus line 2)	<u>1229.86</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>N/A</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>1,231.86 (interest + balance)</u>
Line 6: Total in-kind contributions this period (page 6)	<u>N/A</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>N/A</u>
Line 8: Name of bank(s) used:	<u>St. Mary's Credit Union</u>

#### 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: Seymour (Treasurer's signature) Date: 1/17/11

#### 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: [Signature] (Candidate's signature) Date: 1/12/10





**SCHEDULE C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		N/A		
<b>Line 15: In-kind over \$50</b>				
<b>Line 16: In-kind \$50 and under</b>				
<b>Line 17: Total In-kind</b>				

Enter on page 1, line 6

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

**SCHEDULE D: LIABILITIES**

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
		N/A		
<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>				

Enter on page 1, line 7



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 20 A 11:35

**Fill in dates:**

Reporting Period Beginning 1 / 1 / 2010 Ending 12 / 31 / 2010

**Type of report: (Check one)**

8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

GEORGE EDWARD STEIN

Full Name of Candidate (if applicable)

WARD 3 CITY COUNCILOR

Office Sought and District

28 SANDWICH ROAD

Residential Address

MARLBOROUGH MA 01508 481-7608

Tel. No. (optional)

COMMITTEE TO ELEC GEORGE STEIN

Committee Name

MARY ANN STEIN

Name of Committee Treasurer

28 SANDWICH ROAD

Committee Mailing Address

MARLBOROUGH, MA 01508 481-7608

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 121.02

Line 2: Total receipts this period (page 2, line 11) \$ \_\_\_\_\_

Line 3: Subtotal (line 1 plus line 2) \$ 121.02

Line 4: Total expenditures this period (page 3, line 14) \$ 5.00

Line 5: Ending balance (line 3 minus line 4) \$ 116.02

Line 6: Total in-kind contributions this period (page 4) \$ \_\_\_\_\_

Line 7: Total (all) outstanding liabilities (page 4) \$ 2082.53

Line 8: Name of bank(s) used MARLBOROUGH SAVINGS BANK

**Affidavit of Committee Treasurer:**

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, 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:

Mary Ann Stein  
Treasurer's signature (in ink)

1/20/11  
Date

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

**Affidavit of Candidate: (check 1 box only)**

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:

[Signature]  
Candidate signature (in ink)

1/20/2011  
Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>				Enter on page 1, line 2
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>				

\* 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 C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

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

**SCHEDULE D: LIABILITIES**

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
VARIOUS	GEORGE STEIN	28 SANDINI RD MARLBOROUGH, MA	LOAN	632.73
VARIOUS	GEORGE STEIN	28 SANDINI RD MARLBOROUGH, MA	LOAN	1129.08
VARIOUS	GEORGE STEIN	28 SANDINI RD MARLBOROUGH, MA	LOAN	320.72
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	2082.53



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth  
of Massachusetts

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 19 P 1:27

**Fill in dates:**

Reporting Period Beginning Aug <sup>Month</sup> 2 <sup>Date</sup> 2010 <sup>Year</sup> Ending Dec <sup>Month</sup> 31 <sup>Date</sup> 2010 <sup>Year</sup>

**Type of report: (Check one)**

8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

Robert J. Tunnera  
Full Name of Candidate (if applicable)  
City Councilor Ward 4  
Office Sought and District  
23 Summer St  
Residential Address  
Marlboro MA 508-414-0838  
Tel. No. (optional)

Committee to Elect Robert J. Tunnera  
Committee Name  
Joseph A. Tunnera  
Name of Committee Treasurer  
46 Richard Rd  
Committee Mailing Address  
Marlboro MA 508-481-0671  
Tel. No. (optional)

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report \$ 1053.09  
Line 2: Total receipts this period (page 2, line 11) \$ 0  
Line 3: Subtotal (line 1 plus line 2) \$ 1053.09  
Line 4: Total expenditures this period (page 3, line 14) \$ 500.00  
Line 5: Ending balance (line 3 minus line 4) \$ 553.09  
Line 6: Total in-kind contributions this period (page 4) \$ 0  
Line 7: Total (all) outstanding liabilities (page 4) \$ 0  
Line 8: Name of bank(s) used Marlboro Savings Bank

**Affidavit of Committee Treasurer:**

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, 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:

Joseph A. Tunnera  
Treasurer's signature (in ink)

1-20-2011  
Date

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

**Affidavit of Candidate: (check 1 box only)**

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:

Robert Tunnera  
Candidate signature (in ink)

1-20-2011  
Date





**SCHEDULE C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

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

**SCHEDULE D: LIABILITIES**

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	



# Form CPF M 102: Campaign Finance Report

## Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2011 JAN 13 A 10:59

### Fill in dates:

Reporting Period Beginning 

Month	Date	Year
01	01	10

 Ending 

Month	Date	Year
12	31	10

### Type of report: (Check one)

8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

JOSEPH A. VALARIOTI

Full Name of Candidate (if applicable)

SCHOOL COMMITTEE HASABET REGTECH HS

Office Sought and District

25 BOUNDARY ST MARLBOROUGH MA

Residential Address

508-485-4877

Tel. No. (optional)

NONE

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$	<u>0</u>
Line 2: Total receipts this period (page 2, line 11)	\$	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	\$	<u>0</u>
Line 4: Total expenditures this period (page 3, line 14)	\$	<u>0</u>
Line 5: Ending balance (line 3 minus line 4)	\$	<u>0</u>
-----		
Line 6: Total in-kind contributions this period (page 4)	\$	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$	<u>0</u>
Line 8: Name of bank(s) used		<u>0</u>

### 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 (in ink)

Date

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

### Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:

Joseph A. Valarioti

Candidate signature (in ink)

1-3-11

Date

**SCHEDULE A: RECEIPTS**

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only 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.*

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

<b>Date Received</b>	<b>Name and Residential Address (alphabetical listing required)</b>	<b>Amount</b>		<b>Occupation &amp; Employer (for contributions of \$200 or more)</b>
<b>Line 9: Total receipts in excess of \$50 (or listed above)</b>				Enter on page 1, line 2
<b>Line 10: Total receipts \$50 and under* (not listed above)</b>				
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>				

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



**SCHEDULE C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

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

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

**SCHEDULE D: LIABILITIES**

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7			<b>Line 18: OUTSTANDING LIABILITIES (ALL)</b>	



Commonwealth of Massachusetts

" Amended "

Form CPF M 102: Campaign Finance Report  
Municipal Form

Office of Campaign and Political Finance

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

2012 OCT 18 P 12:49

File with:  
City or Town Clerk or Election Commission

Reporting Period - Beginning: 1/1/2010 Ending: 12/31/2010

Type of report: Year-end

Arthur G. Vigeant

Full Name of Candidate

City Councilor at Large

Office Sought/ District

186 Main Street  
Marlborough, MA 01752

Residential Address

Committee to Elect Arthur G. Vigeant

Committee Name

Stephen Vigeant

Name of Committee Treasurer

186 Main Street  
Marlborough, MA 01752

Committee Address

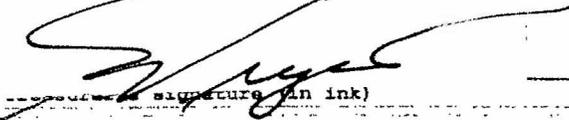
SUMMARY BALANCE INFORMATION

Ending Balance from previous report:	\$5,460.78
Total receipts this period:	\$8,647.82
Subtotal:	\$14,108.60
Total expenditures this period:	\$3,963.20
Ending Balance:	\$10,145.40
Total inkind contributions this period:	\$0.00
Total outstanding liabilities:	\$10,423.31
Name of bank(s) used:	Peoples United Bank

Affidavit of Committee Treasurer:

I certify that I have examined this report, including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity including all contributions, loans, receipts, expenditures, disbursements, inkind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:



Signature (in ink)

10-17-12  
Date

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, and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR candidate with independent activity filing separate report.

I certify that I have examined this report and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity including contributions, loans, receipts, expenditures, disbursements, inkind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:



10-17-12

## Schedule A: Receipts

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

Date	Name and Residential Address	Amount	Occupation and Employer
12/31/2010	BERGERON, Arthur 54 SHEA DRIVE Marlborough, MA 01752	\$500.00	ATTORNEY Mirick O'Connell
12/31/2010	BONIN, Walter 64 COUNTRY LANE Marlborough, MA 01752	\$125.00	FINANCIAL ADVISOR SELF
12/31/2010	BREAZZANO, David 193 DUTTON ROAD Sudbury, MA 01776	\$250.00	Investments DDJ Capital MANAGEMENT
12/31/2010	Burdan, Stanislav 69 Lowell Avenue Newton, MA 02460	\$250.00	Business Owner ST MARY'S OF FRENCH HI
12/31/2010	CONNORS, Robert 10 HUNDREDS ROAD WESTBORO, MA 01581	\$250.00	REAL ESTATE MANAGEMENT <del>SELF</del> Robert Connors
12/31/2010	Delli Priscoli, Jon 929 Boston Post Road East Marlborough, MA 01752	\$250.00	Developer Brigham Dev. Co. Inc
12/31/2010	Donnarumma, Benjamin 329 Maple Street Marlborough, MA 01752	\$250.00	Owner All Star Auto Sales
12/31/2010	DWYER, Margaret 33 SPOONHILL AVENUE Marlboro, MA 01752	\$250.00	CONSULTANT MMD STRATEGIC SERVICES
12/31/2010	FERRECCHIA, Stefanie 172 SHAWMUT AVENUE Marlborough, MA 01752	\$250.00	REAL ESTATE SALES DORA NAVES & ASSOC, IN
12/31/2010	GADBOIS, David 27 PROSPECT STREET Marlboro, MA 01752	\$250.00	ATTORNEY <del>SELF</del> David Gadbois, Attorney at Law

Date	Name and Residential Address	Amount	Occupation and Employer
12/31/2010	Giroux, James 8 Naugler Ave Marlborough, MA 01752	\$125.00	
12/31/2010	HARGRAVE, Alfred 19 POWERLINE ROAD Grafton, MA 01519	\$100.00	C P A SELF
12/31/2010	HOGAN, Michael 33 SPOONHILL AVENUE Marlborough, MA 01752	\$250.00	President & CEO A D Makepeace Co
12/31/2010	Holland, Richard 666 Brigham Street Marlborough, MA 01752	\$300.00	Owner Holland Woodworking, I
12/31/2010	KANE, Shirley 25 LEWIS STREET Hudson, MA 01749	\$250.00	RETIRED NA
12/31/2010	Kays, Robert 520 Lincoln St Marlborough, MA 01752	\$250.00	Owner Prospector Saloon
12/31/2010	McCARTHY, Daniel 14 PINECONE LANE Southborough, MA 01772	\$100.00	C P A SELF
12/31/2010	MITRAKAS, Greg 230 SIMPSON ROAD Marlborough, MA 01752	\$250.00	Realtor Mitrakas Realty
12/31/2010	MITRAKAS, Gregory 39 VARLEY RD Marlboro, MA 01752	\$250.00	ATTORNEY <del>SELF</del> <i>Law offices of Gregory Mitrakas</i>
12/31/2010	MOSCHOS, D.M. 100 FRONT STREET #1700 Worcester, MA 01608	\$200.00	ATTORNEY Mirrick O'connell
12/31/2010	Murphy, Brian 34 Alan Road Marlborough, MA 01752	\$500.00	Energy Consultant Colonial Power Group,
12/31/2010	MURPHY, Michael 76 EAST END ROAD Bolton, MA 01740	\$250.00	INSURANCE AGENT MURPHY INSURANCE

Date	Name and Residential Address	Amount	Occupation and Employer
12/31/2010	NAHIGIAN, Harold 23 Highland Street Cambridge, MA 02138	\$250.00	R/E DEVELOPER / Investor <del>SELF</del> Harold S Nahigian
12/31/2010	O'Malley, Michael One Kelly Lane Hudson, MA 01749	\$250.00	Business Owner MFO SERVICES, INC.
12/31/2010	PEZZONI, William 23 PRESIDENTIAL DRIVE Southborough, MA 01772	\$125.00	ATTORNEY Day Pitney LLP
12/31/2010	POLANOWICZ, John 2 ABENAKI ROAD Northboro, MA 01532	\$200.00	CEO MARLBOROUGH HOSPITAL
12/31/2010	SALUK, Bruce 359 CHESTNUT STREET Hudson, MA 01749	\$300.00	CIVIL ENGINEER <del>SELF</del> Bruce Saluk Associate,
12/31/2010	Santos, Joseph 8 Santos Drive Hudson, MA 01749	\$500.00	Business Owner L & S Boule Ins Co, In
12/31/2010	SHAY, Joseph 3 WYNDEMERE DRIVE Southborough, MA 01772	\$250.00	CO PRESIDENT KENS FOODS
12/31/2010	Shepard, Jamie 72 Donahue Drive Marlborough, MA 01752	\$500.00	Sales ICI CORP
12/31/2010	Teager, Thomas 190 Rolling Meadow Drive Holliston, MA 01746	\$250.00	Business Owner ForeKicks
12/31/2010	VIGEANT, Stephen 51 RED SPRING ROAD MARLBOROUGH, MA 01752	\$500.00	COMPUTER SOFTWARE TRACKER SYSTEMS, INC.
Total Itemized Receipts		\$8,575.00	
Total Unitemized Receipts		\$72.82	
Total Receipts		\$8,647.82	

## Schedule B: Expenditures

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
1/14/2010	ARTHUR VIGEANT 650 PLEASANT STREET MARLBOROUGH, MA 01752	\$2,000.00	Liability repayment
12/31/2010	Butler Bank Main Street Marlborough, MA 01752	\$125.00	Bank Fee
1/5/2010	Dave Walton 178 Prairie Street Concord, MA 01742	\$100.00	Boys Club Annual Dinner
6/7/2010	Emoloyment Options, Inc. Brigham Street Marlborough, MA 01752	\$100.00	Donation
6/3/2010	Evangelidis Committee 215 Newell Road Holden, MA 01520	\$100.00	13916 Contribution
1/4/2010	Gatehouse Media NE P.O.Box 981067 Marlborough, MA 01752	\$239.20	Subscription
1/4/2010	Kathy Fausnacht 15 Jackson Circle Franklin, MA 02038	\$195.00	Office Help
9/7/2010	Levy Committee 61 O'Grady Road Marlborough, MA 01752	\$100.00	14749 Contribution
5/25/2010	M E D C Main Street Marlborough, MA 01752	\$350.00	Dues and Subscriptions
9/7/2010	MAIN STREET JOURNAL 186 MAIN STREET MARLBOROUGH, MA 01752	\$199.00	Advertising
5/25/2010	Marlborough 350 Main Street Marlborough, MA 01752	\$175.00	Advertising

Date	Name and Address	Amount	Purpose
9/23/2010	Polito Committee 11 Coachman Ridge Rd. Shrewsbury, MA 01545	\$100.00	13256 Contribution
Total Itemized Expenditures		\$3,783.20	
Total Unitemized Expenditures		\$180.00	
Total Expenditures		\$3,963.20	

## Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind contributions of more than \$50. In-kind contributions \$50 and under may be added together, from the committee's records, and included in line 16. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description Occupation/Employer
	Total Itemized Inkind Contributions	\$0.00	
	Total Unitemized Inkind Contributions	\$0.00	
	Total Inkind Contributions	\$0.00	

### Schedule D: Liabilities

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as the liabilities incurred during this reporting period.

Date	To Whom Due	Amount	Purpose
10/30/2008	Arthur Vigeant 650 Pleasant Street Marlborough, MA 01752	\$3,966.05	Printing
11/3/2008	Arthur Vigeant 650 PLEASANT STREET Marlborough, MA 01752	\$3,457.26	Printing
12/31/2003	ARTHUR VIGEANT 650 PLEASANT STREET MARLBOROUGH, MA 01752	\$3,000.00	LOAN
Total Outstanding Liabilities		\$10,423.31	