



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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CITY OF MARLBOROUGH

2025 OCT 27 PM 3:38

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 09-29-2025 Ending Date: 10-27-2025

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

Matthew Stephen Sargent
Candidate Full Name (if applicable)
City Council Ward 7
Office Sought and District
90 Denoncourt st Marlborough, MA 01752
Residential Address
E-mail: matty.sargent@gmail.com
Phone #: 7574197305

Committee to Elect Matthew Sargent
Committee Name
Matthew Cormier
Name of Committee Treasurer
10 Hardy rd Marlborough, MA 01752
Committee Mailing Address
E-mail: mcorms@gmail.com
Phone #: 508 735 4303

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 12)	<u>91,113.29</u>
Line 3: Subtotal (line 1 plus line 2)	<u>91,113.29</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>863.29</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>90,250</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>863.29</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	
Line 9: Name of bank(s) used:	<u>Main Street 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.
Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 10/27/25

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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 that are not otherwise disclosed in this report.

Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 10/27/25

SCHEDULE A: RECEIPTS

G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/25/25	Robert Gregoire Marlborough 39 Country lane MA 01752	\$ 50.00	
9/25/25	Uranus Colianni Marlborough #3 Lakeshore Dr MA 01752	\$ 50.00	
10/16/25	Matthew Cormier Marlborough 10 Hardy rd MA 01752	\$ 50.00	
8/14/25	Alisha Jacobs MA 12 Belmont rd Brookline 02467	\$ 100.00	
10/15/25	Matthew Sargent 90 Penon Court St Marlborough, MA 01752	863.29	

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
8/25/25	Minuteman Press	160 Main st Marlborough, MA 01752	Yard Signs	\$ 323.13
9/11/25	Minuteman Press	160 Main st Marlborough, MA 01752	flyers	\$ 96.22
9/17/25	Gemini Signs	128 S Bolton st #2 Marlborough, MA 01752	Yard Signs	\$ 260.00
10/10/25	Minuteman Press	160 Main st Marlborough, MA 01752	Post cards	\$ 45.94
10/15/25	Gemini Signs	128 S Bolton st #2 Marlborough, MA 01752	Yard signs	\$ 138.00

SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount
10/15/25	Matthew Sargent	90 Denoncourt st Marlborough, MA 01752	Loan from Candidate	\$863.29
Enter on page 1, line 7 →			Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)	\$863.29