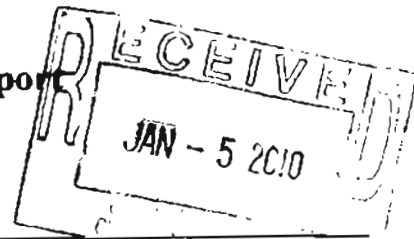




**Form CPF M 102: Campaign Finance Report
Municipal Form**
Office of Campaign and Political Finance



File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning 1 / 1 / 2009 Ending 12 / 31 / 2009

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)

WARD 7

Office Sought and District

124 Kosmas ST.

Residential Address

MARLBOROUGH MA 01752

Tel. No. (optional)

COMMITTEE To Elect - RALPH P. 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) \$ —
 Line 3: Subtotal (line 1 plus line 2) \$ 6.27
 Line 4: Total expenditures this period (page 3, line 14) \$ —
 Line 5: Ending balance (line 3 minus line 4) \$ 6.27
 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 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
Treasurer's signature (in ink)

Signed under the penalties of perjury:

1/6/10
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
Candidate signature (in ink)

Signed under the penalties of perjury:

1/6/2010
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)
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD		- 0 -		Enter on page 1, line 2

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

SCHEDULE 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	
			Line 12: Expenditures over \$50		
			Line 13: Expenditures \$50 and under*		
			Line 14: TOTAL EXPENDITURES	- 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
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.

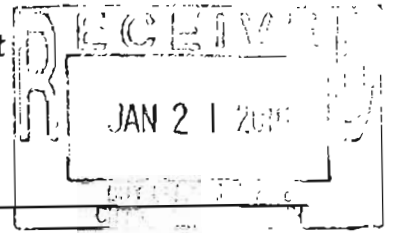
Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	0 - 0



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance



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

Fill in dates:
 Reporting Period Beginning Month 10 Date 26 Year 2009 Ending Month 12 Date 31 Year 2009

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

Michelle Bodin-Hettinger
 Full Name of Candidate (if applicable)
Marlborough School Committee
 Office Sought and District
279 Robert Road, Marlborough
 Residential Address
 Tel. No. (optional)

Committee to elect Michelle Bodin-Hettinger
 Committee Name
Lisa Podoloff Boles
 Name of Committee Treasurer
6 Stearns Road 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) \$ 1,000.00
 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: 1/20/10
 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 J. Bodin-Hettinger Signed under the penalties of perjury: 1/20/10
 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)
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD				

Enter on page 1, line 2

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

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	
Enter on page 1, line 4			Line 12: Expenditures over \$50		
			Line 13: Expenditures \$50 and under*		
			Line 14: TOTAL EXPENDITURES		

*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
9/26/05	Michelle Bodin-Hettinger	279 Robert Road Marlborough	Campaign Expenses	\$1,000.00
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	\$1,000.00



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

1461211
JAN 13 2010

File with:

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

File in dates:

Reporting Period Beginning Month 9 Day 29 Year 09 Ending Month Dec Day 31 Year 2009

Type of report: (Check one)

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

Jennifer Boudrie
Full Name of Candidate (if applicable)
City Council Ward 7
Office Sought and District
95 GRACE Circle
Residential Address
WATERBURY MA
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 0

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

Jennifer Boudrie

Jan. 13, 2010

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)
Line 9: Total receipts in excess of \$50 (or listed above)			
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		0	Enter on page 1, line 2

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

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	
Line 12: Expenditures over \$50					
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				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
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

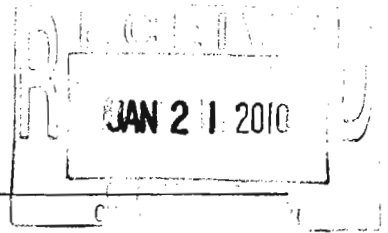
M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

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



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance



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

Fill in dates:

	Month	Date	Year		Month	Date	Year
Reporting Period Beginning	10	26	09	Ending	12	31	09

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
DRUISE 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>0</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>50</u>

Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ _____
Line 8: Name of bank(s) used	<u>Citizens 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 1-21-10

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) Paul Brodeur Date 1-21-10

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)
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD		0		Enter on page 1, line 2

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

SCHEDULE 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	
			Line 12: Expenditures over \$50		
			Line 13: Expenditures \$50 and under*		
Enter on page 1, line 4			Line 14: TOTAL EXPENDITURES	0	

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

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

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

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: 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
Line 18: OUTSTANDING LIABILITIES (ALL)				0

Enter on page 1, line 7

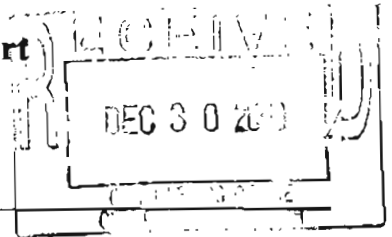


Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance



File with:

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

Fill in dates:

Reporting Period Beginning	Month	Day	Year	Ending	Month	Day	Year
	10	29	09		12	31	09

Type of report: (Check one)

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

JOHN F. CHAGNON
 Full Name of Candidate (if applicable)

WARD-2 CITY COUNCIL
 Office Sought and District

40 MUSTANG AVE.
 Residential Address

MARLBORO
 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	\$ 505.56
Line 2: Total receipts this period (page 2, line 11)	\$ 0.00
Line 3: Subtotal (line 1 plus line 2)	\$ 505.56
Line 4: Total expenditures this period (page 3, line 14)	\$ -76.84
Line 5: Ending balance (line 3 minus line 4)	\$ 428.72
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	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: John Chagnon Date: 12-29-09

Treasurer's signature (in ink)

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: John F. Chagnon Date: 12-29-09

Candidate signature (in ink)

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)
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD				Enter on page 1, line 2

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

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	
10/26/9	DESIGN STUDIO	852 CONCORD ST RD. MARLBORO, MA	STANDS LAWN	21.	90
10/29/9	SD VISUAL IMAGES	40 HUDSON ST MARLBORO, MA	PRINTING	44.	94
Line 12: Expenditures over \$50					
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				76.	84

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.

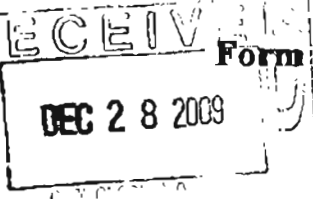
Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

* 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
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	



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

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning ^{Month} 9 ^{Day} 29 ^{Year} 2009 Ending ^{Month} 12 ^{Day} 31 ^{Year} 2009

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:

Thomas Clancy
Treasurer's signature (in ink)

12/28/09
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:

Edward Clancy
Candidate signature (in ink)

12/28/09
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)
Line 9: Total receipts in excess of \$50 (or listed above)				Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD				

* 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	
			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 itemized above. Page 3

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	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

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

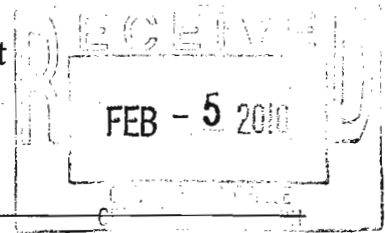
M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
9/01/2008 12/31/2009	Edward J. Clancy	106 Old Charter Rd. Marlborough, MA 01752	Campaign Expense	\$4462.43
			Line 18: OUTSTANDING LIABILITIES (ALL)	\$4462.43

Enter on page 1, line 7



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



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

Fill in dates:

Reporting Period Beginning October ^{Month} 27 ^{Date} 2009 ^{Year} Ending December ^{Month} 31 ^{Date} 2009 ^{Year}

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 of Marlborough MA
Office Sought and District
15 Redbud Way #21
Residential Address
Marlborough, MA 01752
508-251-1326 Tel. No. (optional)

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

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>455.00</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>50.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>505.00</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>5.00</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>N/A</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>1029.59</u>
Line 8: Name of bank(s) used	<u>Digital Federal 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 2/4/10

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)

Line 9: Total receipts in excess of \$50 (or listed above)	0	\$0	
Line 10: Total receipts \$50 and under* (not listed above)	50	\$0	
Line 11: TOTAL RECEIPTS IN THE PERIOD	50	\$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	
11/20/09	Joseph P. Collins	15 Redbud Way #21 Marlborough MA 01752	Loan Repayment	500	00
Line 12: Expenditures over \$50				500	00
Line 13: Expenditures \$50 and under*				0	00
Line 14: TOTAL EXPENDITURES				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
			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
Enter on page 1, line 6			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
8/26/09	Collins, Joseph P.	15 Redbud Way #21 Marlborough MA 01752	Parade Banner	611.04
10/7/09	Collins, Joseph P.	15 Redbud Way #21 Marlborough MA 01752	Yard Signs	418.55
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	1029.59



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

0120

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning Month 12 Day 3 Year 2009 Ending Month 1 Day 19 Year 2010

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

Joseph F. Delano, Jr.
Full Name of Candidate (if applicable)
MARLBOROUGH CITY COUNCIL
Office Sought and 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 \$ 1,178
Line 2: Total receipts this period (page 2, line 11) \$ 0
Line 3: Subtotal (line 1 plus line 2) \$ 1,178
Line 4: Total expenditures this period (page 3, line 14) \$ 380.35
Line 5: Ending balance (line 3 minus line 4) \$ 797.

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 ST. MARY'S

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 1/19/2010
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 F. Delano 1/19/2010
Candidate's 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)
Line 9: Total receipts in excess of \$50 (or listed above)				Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD				

* 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	
1/4/10	METROWEST PRINTING	MAIN Street MARLBOROUGH	Notecards	380.	41
Line 12: Expenditures over \$50				380.	41
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				380.	41

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
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				

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.

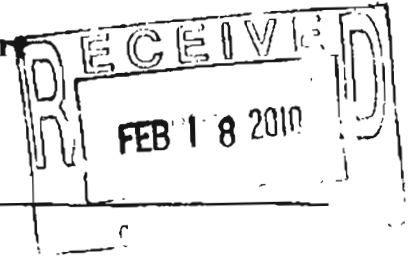
Date Incurred	To Whom Due	Address	Purpose	Amount
Line 18: OUTSTANDING LIABILITIES (ALL)				

Enter on page 1, line 7

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



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



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

Fill in dates:
 Reporting Period Beginning January 21 ^{Month} ^{Day} 2009 ^{Year} Ending Jan 20 ^{Month} ^{Day} 2010 ^{Year}

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

Margaret M. Dwyer
 Full Name of Candidate (if applicable)
Marlborough School Committee
 Office Sought and District
33 Spoonhill Avenue
 Residential Address
508-481-3021
 Tel. No. (optional)

Committee to Elect Margaret Dwyer
 Committee Name
Brenda Calder
 Name of Committee Treasurer
33 Spoonhill 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	<u>Marlboro Savings 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.
Brenda Calder Signed under the penalties of perjury: 2-16-10
 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 M. Dwyer Signed under the penalties of perjury: Feb 17, 2010
 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)
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD		0		Enter on page 1, line 2

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

SCHEDULE 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	
Line 12: Expenditures over \$50					
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES			-	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
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)	3300



Commonwealth of Massachusetts

Form CPF 102A : Amendment to Campaign Finance Report Office of Campaign and Political Finance

RECEIVED
CITY CLERK'S OFFICE
CITY OF MARLBOROUGH

File with: Director

Office of Campaign and Political Finance
Or Local Election Office

2014 JAN 21 P 1:08
CPF ID# _____

Please print or type all information, except signatures.

Reporting Period: Beginning date: 10/27/09 Ending Date: 12/31/09
 Report being amended:
 Year: 09 Pre-primary Pre-election Year-end 30 day after special election Other

Candidate Name: Math Elder
 Committee Name: CFE Math Elder
 Treasurer Name: David L. K. Wolff

SUMMARY BALANCE INFORMATION:	
Line 1: Ending balance from previous report	\$ <u>470</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>4469</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>4939</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>4269.21</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>669.79</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>7732</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ _____

The original filing of the above-referenced campaign finance report is being amended for the following reason(s):

difference from earlier amendment and mis match in previous ending balance

Signed under the penalties of perjury:
[Signature] 1/21/14
Candidate Signature (in ink) Date

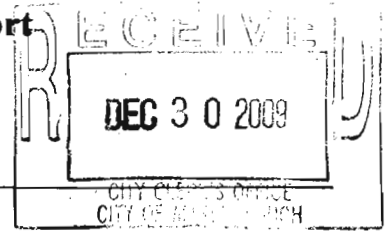
Signed under the penalties of perjury:
[Signature] 1/21/14
Treasurer signature (in ink) Date



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance



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

Fill in dates: Reporting Period Beginning Month 9 Date 12 Year 07 Ending Month 12 Date 31 Year 09

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

Matthew Elder
Full Name of Candidate (if applicable)
City Councilor Ward 3
Office Sought and District
12 Tucker Ave
Residential Address
Tel. No. (optional)

Committee to elect Matthew Elder
Committee Name
Meghan Schreiner
Name of Committee Treasurer
12 Tucker Ave Marlborough MA
Committee Mailing Address
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:	
Line 1: Ending balance from previous report	\$ <u>3563</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>204469</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>8032</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>4269.21</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>3763</u>
Line 6: Total in-kind contributions this period (page 4)	\$ _____
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>7732</u>
Line 8: Name of bank(s) used	<u>TD 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.
Meghan Schreiner Signed under the penalties of perjury: 12/19/09
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: 12/29/09
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)
12/13	Chanel Prunier 43 Shirley Rd Shrewsbury, MA	25.00		Costition for Family and Marriage
10/26	Matt Elder 12 Tucker Ave Marblehead, MA 01752	41.69	00	in Sports - Self LOAN
Line 9: Total receipts in excess of \$50 (or listed above)		41.69	00	
Line 10: Total receipts \$50 and under* (not listed above)		0.00	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		41.69	00	Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

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	
10/26	Connolly Printing	300 Salem St <small>Woburn, MA</small>	Direct Mail	1,272	57
10/26	Connolly Printing	300 Salem St <small>Woburn, MA</small>	D.M.	1,272	57
10/26	Connolly Printing	300 Salem St <small>Woburn MA</small>	D.M.	1,272	57
10/26	Connolly Printing	300 Salem St <small>Woburn, MA</small>	Yard Signs	351	50
11/11	Advantage, Inc	2306 Clarendon Blvd <small>Arlington, VA 22201</small>	Lobby Calls	100	00
Line 12: Expenditures over \$50				4269	21
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				4269	21

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	
Enter on page 1, line 6			Line 16: In-kind \$50 and under	
Enter on page 1, line 6			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.

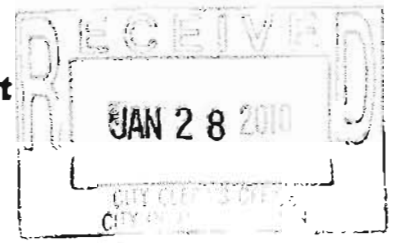
SCHEDULE D: LIABILITIES

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
9/25	Matt Elder	12 Tucker Ave	LEGIS	3583
10/21	Matt Elder	12 Tucker Ave	LEGIS	4169
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	7752



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



File with:
 City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
 Reporting Period Beginning 10 - 17 - 2009 Ending 12 - 31 - 2009

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

Paul R. Ferru
 Full Name of Candidate (if applicable)
City Council, Ward 2
 Office Sought and District
53 Edinboro St.
 Residential Address
Marlborough, MA 01750
 Tel. No. (optional)

Friends of Paul Ferru
 Committee Name
Christine Ferru
 Name of Committee Treasurer
P.O. Box 737
 Committee Mailing Address
Marlborough, MA 01750
 Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$1946.50
Line 2: Total receipts this period (page 2, line 11)	\$1966.00
Line 3: Subtotal (line 1 plus line 2)	\$3912.50
Line 4: Total expenditures this period (page 3, line 14)	\$3905.97
Line 5: Ending balance (line 3 minus line 4)	\$6.53

Line 6: Total in-kind contributions this period (page 4)	\$157.00
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 Ferru 1-20-2010
 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:
Paul R. Ferru 1/20/09
 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)
	See Attached			

Line 9: Total receipts in excess of \$50 (or listed above)		
Line 10: Total receipts \$50 and under* (not listed above)		
Line 11: TOTAL RECEIPTS IN THE PERIOD		

Enter on page 1, line 2

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

Receipts

Date	First Name	Last Name	Address 1	City	State	Zip	Amount	Occupation
10/17/09	Jack	Barron	11 Sadie Hutt Ln.	Southboro	MA	01772	\$25.00	
10/17/09	Harold	Benway	39 Dartmouth St.	Marlborough	MA	01752	\$300.00	Foreman, Murray Exdamation
10/17/09	Dennis	Kennedy	80 Cameron Dr.	Marlborough	MA	01752	\$200.00	President, Kennedy's Pub
10/19/09	Brian	Murphy	34 Alan Rd.	Marlborough	MA	01752	\$200.00	President, Colonial Power Group
10/19/09	Fred	Brewitt	299 Sudbury St.	Marlborough	MA	01752	\$100.00	
10/19/09	Marion	Zola	31 Village Dr.	Marlborough	MA	01752	\$25.00	
10/19/09	Rocco	Addeo	57 Rafeale Rd.	Marlborough	MA	01752	\$25.00	
10/19/09	Christopher	Ward	215 Ash Ln	Annapolis	MD	21409	\$25.00	
10/19/09	Demetrios	Kambosos	554 Boston Post Rd. East	Marlborough	MA	01752	\$100.00	
10/20/09	Jospeh	Bisol	212 Hudson St.	Marlborough	MA	01752	\$50.00	
10/20/09	Janet	McGrath	47 Worster Rd.	Marlborough	MA	01752	\$50.00	
10/21/09	William	Higgins	35 Pleasant St.	Northboro	MA	01532	\$51.00	
10/22/09	Jennifer	Chang	5 Santa Gina Ct.	Hillborough	CA	94010	\$20.00	
10/22/09	Richard	Brittain	15 Davis St.	Lee	MA	01238	\$20.00	
10/23/09	Arthur	Bergeron	54 Shea Dr.	Marlborough	MA	01752	\$100.00	
10/24/09	MIPAC	OCPF #80587	4 Country Club Dr.	Walpole	MA	02081	\$200.00	
10/27/09	Alice	Williams	207 Burnham Rd	Freedom	NH	03836	\$150.00	
10/28/09	Douglas	Rowe	540 Concord Rd.	Marlborough	MA	01752	\$50.00	
10/29/09	Wesley	Tuttle	23 Red Spring Rd.	Marlborough	MA	01752	\$100.00	
10/30/09	Nancy	Hough	174 Helen Dr.	Marlborough	MA	01752	\$25.00	
11/2/09	William	Downey Jr.	1011 Concord Rd.	Marlborough	MA	01752	\$100.00	
12/23/09	Chanel	Prunier	43 Shirley Rd.	Shrewsbury	MA	01545	\$50.00	
							\$1,966.00	

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 \$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	
	See	Attached			
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 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
	See	Attached		
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				

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
10/03	Paul Ferris	53 Elinburg St Marlboro, MA	candidate loan	250.00
10/07	Paul Ferris	53 Elinburg St Marlboro, MA	candidate loan	2500.00
Line 18: OUTSTANDING LIABILITIES (ALL)				

Enter on page 1, line 7

In-Kind

Date	Name	Address	City	State	Zip	Amount	Purpose
10/28/09	CTE Matt Elder	12 Tucker Ave.	Marlborough	MA	01752	\$157	Bulk Mail Stamps

Total in-Kind: \$157.00



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

FEB - 2 2010

City or Town of: Marlborough Jennifer Hardy

Please print or type all information, except signatures.

Fill in dates:	Month	Day	Year	Month	Day	Year
Reporting Period Beginning	<u>9</u>	<u>28</u>	<u>2009</u>	Ending	<u>2</u>	<u>2010</u>

Type of Report: (Check One)

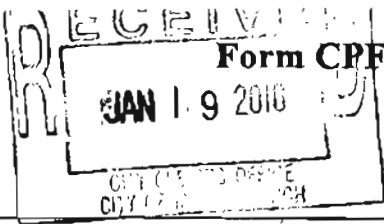
8th day preceding preliminary/primary
 8th day preceding election
 30th day following election (Town or Special)
 20th day of January (Year-End Report)

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

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
<u>2/2/10</u>	<u>Jennifer Hardy</u>	<u>115 Union St</u>	<u>School Committee</u>





Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

File with:

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

Fill in dates:

Reporting Period Beginning Oct 27, 2009 Ending Dec 31, 2009

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, Marlborough
 Committee Mailing Address
 Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 7289.17
 Line 2: Total receipts this period (page 2, line 11) \$ 0.00
 Line 3: Subtotal (line 1 plus line 2) \$ 7289.17
 Line 4: Total expenditures this period (page 3, line 14) \$ 0.00
 Line 5: Ending balance (line 3 minus line 4) \$ 7289.17
 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: 15 Jun 2010
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: 14 Jan '10
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)
	<i>None</i>		
Line 9: Total receipts in excess of \$50 (or listed above)			
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		<i>- 0 00</i>	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	
	<i>None</i>				
				Line 12: Expenditures over \$50	-000
				Line 13: Expenditures \$50 and under*	—
				Line 14: TOTAL EXPENDITURES	-000

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
	<i>None</i>			

Enter on page 1, line 6

Line 15: In-kind over \$50	-0.00
Line 16: In-kind \$50 and under	-0.00
Line 17: Total In-kind	-0.00

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

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.

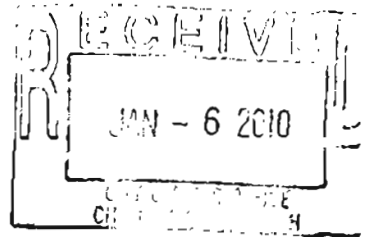
Date Incurred	To Whom Due	Address	Purpose	Amount (\$)
<i>9/24/03</i>	<i>Mark E. Hediger</i>	<i>418 Stearns Rd</i>	<i>Start Up</i>	<i>-166.67</i>
<i>9/25/03</i>	↓	↓		<i>-1500.00</i>
<i>9/17/05</i>	↓	↓		<i>-200.00</i>
<i>10/15/08</i>	↓	↓	<i>Voter Stickers</i>	<i>-100.00</i>

Enter on page 1, line 7

Line 18: OUTSTANDING LIABILITIES (ALL)	-2066.67
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**Form CPF M 102-0: Campaign Finance Report
Municipal Form**
Office of Campaign and Political Finance



City or Town of: MARLBOROUGH

Please print or type all information, except signatures.

Fill in dates:	Month	Day	Year	Ending	Month	Day	Year
Reporting Period Beginning	1	1	09		12	31	09

Type of Report: (Check One)

8th day preceding preliminary/primary
 8th day preceding election
 30th day following election (Town or Special)
 20th day of January (Year-End Report)

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

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

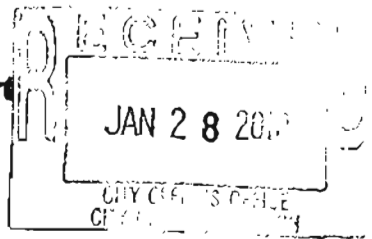
DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/6/10	<i>[Signature]</i>	199 STEVENS ROAD	SCHOOL COMMITTEE
1/4/10	<i>[Signature]</i>		





Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance



File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:	Month	Date	Year	Month	Date	Year
Reporting Period Beginning	12	26	29	Ending	1	23

Type of report: (Check one)

8th day preceding primary
 8th day preceding election
 year-end report
 dissolution
 other (specify)

Peter J. Juare
Full Name of Candidate (if applicable)

Councilor Ward 4
Office Sought and District

296 Bigelow St
Residential Address

Marlboro Mass 01752
Tel. No. (optional)

Committee to Elect Peter Juare
Committee Name

William J. King
Name of Committee Treasurer

55 Wash St
Committee Mailing Address

Marlboro Mass
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ -912.77
Line 2: Total receipts this period (page 2, line 11)	\$ 500.00
Line 3: Subtotal (line 1 plus line 2)	\$ 1012.77
Line 4: Total expenditures this period (page 3, line 14)	\$ 745.05
Line 5: Ending balance (line 3 minus line 4)	\$ 267.72
Line 6: Total in-kind contributions this period (page 4)	\$ 0
Line 7: Total (all) outstanding liabilities (page 4)	\$ 2027.26
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:

William J. King
Treasurer's signature (in ink)

1/28/10
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:

Peter Juare
Candidate signature (in ink)

1/28/10
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)
10/31/09	Marlboro Firefighters Union	500	00	Firefighters Union Local 1114 Int. Assoc. of Firefighters
Line 9: Total receipts in excess of \$50 (or listed above)				Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD		500	00	

* 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	
12/16/09	Boyd's Direct	1003 Maple St Stoneham Mass	Mailings	425	60
12/16/09	Metro West Printing	160 Main St Marlboro	Flyers	94	45
11/4/09	Prospector	Lincoln St Marlboro Mass	Party after Election	225	00
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 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				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				

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
9/13/09	Pete Tuairre	296 Bay St Marlborough Mass	Fundraiser	651.53
9/29/09 12/18/09	Loan From Peter Tuairre	296 Bay St Marlborough Mass	Campaign For Relect	944.25
11/1/09	Peter Tuairre	296 Bay St Marlborough	Outstanding Bal	431.48
Line 18: OUTSTANDING LIABILITIES (ALL)				2027.26

Enter on page 1, line 7



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

DEC 24 2009

File with:

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

Fill in dates:

Reporting Period Beginning Month 1 Date 20 Year 09 Ending Month 1 Date 20 Year 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) \$ 0

Line 3: Subtotal (line 1 plus line 2) \$ 16.65

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

Line 5: Ending balance (line 3 minus line 4) \$ 16.65

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 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 S. Katz
Treasurer's signature (in ink)

12/22/09
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 G. Katz
Candidate signature (in ink)

12/22/09
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)
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD			Enter on page 1, line 2	

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

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	
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 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				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				H

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
Line 18: OUTSTANDING LIABILITIES (ALL)				H

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
JAN 22 2010

File with:
City or Town Clerk or Election Commission

1/19/2010

Reporting Period - Beginning: 10/16/2009 Ending: 12/31/2009

Type of report: Year-end

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

SUMMARY BALANCE INFORMATION

Ending Balance from previous report:	\$831.51
Total receipts this period:	\$0.00
Subtotal:	\$831.51
Total expenditures this period:	\$532.32
Ending Balance:	\$299.19
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:

John Edmond 1-21-10

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:

[Signature] 1-21-10

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
11/23/2009	Kerrigan, Steven 131 Bigelow St Marlborough, MA 01752	\$413.93	Reimbursement (See R1)
11/23/2009	Kerrigan, Steven 131 Bigelow St Marlborough, MA 01752	\$75.00	Reimbursement (See R1)
11/23/2009	Kerrigan, Steven 131 Bigelow St Marlborough, MA 01752	\$43.39	Reimbursement (See R1)
Total Itemized Expenditures		\$532.32	
Total Unitemized Expenditures		\$0.00	
Total Expenditures		\$532.32	

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	



Commonwealth
of Massachusetts

Form CPF R1: Itemization of Reimbursements Municipal Form

Office of Campaign and Political Finance

File with:
City or Town Clerk or Election Commission

1/18/2010

Kerrigan, Steven
Individual Being Reimbursed
The Friends of Steven Kerrigan
Committee Name
\$43.39
Amount of Reimbursement
11/23/2009
Date of Reimbursement

Signed under the penalties of perjury:

	1-21-10
Candidate's/Treasurer's signature (in ink)	Date

Date	Vendor Name and Address	Amount	Purpose
11/3/2009	Hannafords/dunkin Donuts Marlborough, MA 01752	\$43.39	Election Day Food



Commonwealth
of Massachusetts

**Form CPF R1: Itemization of Reimbursements
Municipal Form**

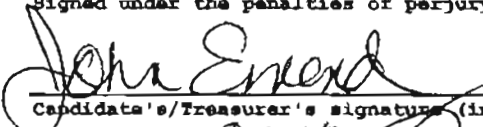
Office of Campaign and Political Finance

File with:
City or Town Clerk or Election Commission

1/18/2010

Kerrigan, Steven
Individual Being Reimbursed
The Friends of Steven Kerrigan
Committee Name
\$413.93
Amount of Reimbursement
11/23/2009
Date of Reimbursement

Signed under the penalties of perjury:

	1-21-10
Candidate's/Treasurer's signature (in ink)	Date

Date	Vendor Name and Address	Amount	Purpose
10/25/2009	Campaignpros.Com	\$413.93	Push Cards



Commonwealth
of Massachusetts

Form CPF R1: Itemization of Reimbursements Municipal Form

Office of Campaign and Political Finance

File with:
City or Town Clerk or Election Commission

1/18/2010

Kerrigan, Steven
Individual Being Reimbursed
The Friends of Steven Kerrigan
Committee Name
\$75.00
Amount of Reimbursement
11/23/2009
Date of Reimbursement

Signed under the penalties of perjury:

Candidate's/Treasurer's signature (in ink)

121-10

Date

Date Vendor Name and Address

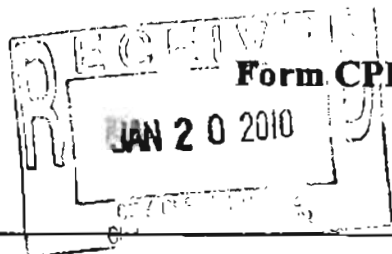
Amount Purpose

10/25/2009 Office Max
Marlborough, MA 01752

\$75.00 Paper/ink/thank You
Cards



Commonwealth of Massachusetts



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates: Reporting Period Beginning 10 / 27 / 09 Ending 12 / 31 / 09

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 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.

Janet Landers
Treasurer's signature (in ink)

Signed under the penalties of perjury:

1/19/10
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.

Donald R. Landers
Candidate signature (in ink)

Signed under the penalties of perjury:

1/19/2010
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)
Line 9: Total receipts in excess of \$50 (or listed above)		-0-		
Line 10: Total receipts \$50 and under* (not listed above)		-0-		
Line 11: TOTAL RECEIPTS IN THE PERIOD		-0-		Enter on page 1, line 2

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

SCHEDULE 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	
Line 12: Expenditures over \$50				- 0 -	
Line 13: Expenditures \$50 and under*				- 0 -	
Line 14: TOTAL EXPENDITURES				- 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
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

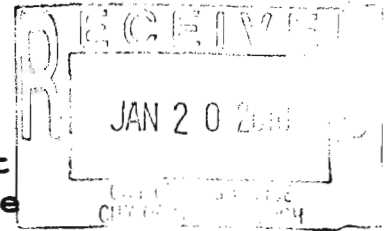
M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

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



Commonwealth
of Massachusetts

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



File with: Director
Office of Campaign and Political Finance
One Ashburton Place
Boston, MA 02108
(617) 727-8352

CPF ID# 14749
1/20/2010

Reporting Period - Beginning: 10/17/2009 Ending: 12/31/2009

Type of report: Year-End

Steven Levy	Committee to Elect Steven Levy
<i>Full Name of Candidate</i>	<i>Committee Name</i>
State Representative/ 4th Middlesex	Sharon Levy
<i>Office Sought/ District</i>	<i>Name of Committee Treasurer</i>
61 O'Grady Road Marlborough, MA 01752	PO Box 722 Marlborough, MA 01752
<i>Residential Address</i>	<i>Committee Address</i>

SUMMARY BALANCE INFORMATION

Ending Balance from previous report:	\$9.58
Total receipts this period:	\$14,480.26
Subtotal:	\$14,489.84
Total expenditures this period:	\$2,239.96
Ending Balance:	\$12,249.88
<hr/>	
Total in-kind contributions this period:	\$180.00
Total outstanding liabilities:	\$22,767.99
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:

Sharon E. Levy

1-16-10

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:

Steven B. Levy

1-16-10

Candidate's 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.

Date	Name and Residential Address	Amount	Occupation and Employer
12/31/2009	Archibald, Robert 18 Clearview Drive Marlborough, MA 01752	\$100.00	Retired N/A
10/26/2009	Balinski, Diane 51 Farrington Lane Marlborough, MA 01752	\$50.00	Admin Assistant St. Matthias Parish
10/26/2009	Balinski, Diane 51 Farrington Lane Marlborough, MA 01752	\$75.00	Admin Assistant St. Matthias Parish
12/23/2009	Balinski, Diane 51 Farrington Lane Marlborough, MA 01752	\$100.00	Admin Assistant St. Matthias Parish
12/31/2009	Barach, Donna 387 River Road Carlisle, MA 01741	\$200.00	Requested Requested
12/26/2009	Belmore, Ralph 124 Kosmas Street Marlborough, MA 01752	\$100.00	
12/28/2009	Citizens for LTM Taxation's 2 ½ PAC 444 Taunton Street Wrentham, MA 02093 80031	\$500.00	
12/23/2009	Fallon, Claire 88 Roundtop Road Marlborough, MA 01752	\$100.00	Retired
12/3/2009	Fitzgibbon, Scott 104 School Street Belmont, MA 02478	\$500.00	Professor Boston College
12/23/2009	Gadbois, David 27 Prospect Street Marlborough, MA 01752	\$250.00	Attorney Self

Date	Name and Residential Address	Amount	Occupation and Employer
12/29/2009	Hoffman, Martin 568 South Street Needham, MA 02492	\$100.00	
12/26/2009	Hopkins, Marian 151 Framingham Road Marlborough, MA 01752	\$75.00	
10/26/2009	Levy (Loan), Steven 61 O'Grady Road Marlborough, MA 01752	\$2,100.00	Candidate Loan to Comm
12/3/2009	MA Independent PAC for Working Families a.k.a MIPAC/WF 4 Country Club Drive Walpole, MA 02081-3414 80587	\$500.00	
12/18/2009	MA Republican Municipal Coalition PAC 43 Shirley Road Shrewsbury, MA 01545 80775	\$500.00	
12/28/2009	McCarthy, Thomas 13 Latisquama Road Southborough, MA 01772	\$100.00	
12/29/2009	O'Malley, Michael One Kelly Lane Hudson, MA 01749	\$100.00	
12/31/2009	Pastore, Richard 127 Desimone Drive Marlborough, MA 01752	\$75.00	
12/3/2009	Shields, Thomas 122 Hart Street Beverly Farms, MA 01915	\$500.00	Retired Shields MRI
12/30/2009	Sullivan, Cornelius 79 E. Main Street Ayer, MA 01432	\$100.00	
12/3/2009	Weld, Walter 29 Main Street Dover, MA 02030	\$500.00	Retired
Total Itemized Receipts		\$6,625.00	
Total Unitemized Receipts		\$7,855.26	
Total Receipts		\$14,480.26	

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
11/10/2009	SD Visual Images 40 Hudson St Marlborough, MA 01752	\$636.35	Printing
10/26/2009	United States Postal Service 25 Church Street Hudson, MA 01749	\$600.00	Stamps
10/29/2009	United States Postal Service 20 Florence St. Marlborough, MA 01752	\$861.28	Postage
11/12/2009	United States Postal Service 20 Florence St. Marlborough, MA 01752	\$88.00	Stamps
12/21/2009	United States Postal Service 20 Florence St. Marlborough, MA 01752	\$54.33	Postage
Total Itemized Expenditures		\$2,239.96	
Total Unitemized Expenditures		\$0.00	
Total Expenditures		\$2,239.96	

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
10/29/2009	Marlborough REPCC P.O. Box 717 Marlborough, MA 01752 76315	\$180.00	Use of bulk rate mail permit
Total Itemized In-kind Contributions		\$180.00	
Total Unitemized In-kind Contributions		\$0.00	
Total In-kind Contributions		\$180.00	

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
10/10/2008	Levy (Loan), Steven 61 O'Grady Road Marlborough, MA 01752	\$3,500.00	Loan from candidate
10/18/2008	Levy (Loan), Steven 61 O'Grady Road Marlborough, MA 01752	\$10,218.52	Loan from candidate
9/10/2009	Levy (Loan), Steven 61 O'Grady Road Marlborough, MA 01752	\$400.00	Loan from candidate
10/26/2009	Levy (Loan), Steven 61 O'Grady Road Marlborough, MA 01752	\$2,100.00	Loan from candidate
6/25/2003	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$100.00	Candidate Loan to Committee
6/27/2003	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$1,000.00	Candidate Loan to Committee
7/11/2003	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$7.95	Graphicsland - Bumper Stickers
7/18/2003	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$1,000.00	Candidate Loan to Committee
7/23/2003	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$169.95	Graphicsland - Bumper Stickers
8/22/2003	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$1,036.00	Cross & Oberlie - Yard Signs
10/12/2003	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$300.00	Postmaster - Postage

Date	To Whom Due	Amount	Purpose
1/11/2005	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$50.00	Postmaster - PO Box Rental
6/17/2005	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$1,094.63	SD Visual Images - Printing
7/8/2005	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$50.00	Postmaster - PO Box Rental
9/3/2005	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$250.00	Labor Day Parade Donation
9/4/2005	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$243.44	BJ's Wholesale - Volunteer Appreciation
10/3/2005	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$834.75	Allegra Printing
10/12/2005	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$250.00	Candidate Loan to Committee
10/12/2005	Steven Levy 61 O'Grady Rd Marlborough, MA 01752	\$162.75	SD Visual Images - Printing
Total Outstanding Liabilities		\$22,767.99	

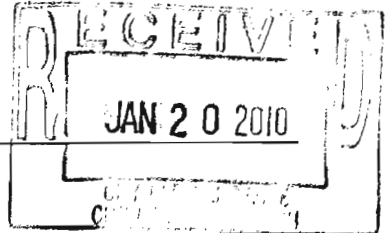


Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance



File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning	Month	Date	Year	Ending	Month	Date	Year
					12	31	2009

Type of report: (Check one)

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

John Patrick McEnaney
 Full Name of Candidate (if applicable)
City Councilor at Large
 Office Sought and District
201 Kings Grant Road
 Residential Address
(508) 481-0371
 Tel. No. (optional)

Committee to Elect John P. McEnaney
 Committee Name
Kristen McEnaney
 Name of Committee Treasurer
201 Kings Grant Road, Marlborough
 Committee Mailing Address
(508) 207-5872
 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></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:

Kristen McEnaney
Treasurer's signature (in ink)

1/17/10
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:

John P. McEnaney
Candidate signature (in ink)

1/17/10
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)
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD		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 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	
Line 12: Expenditures over \$50					
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES					0 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	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

JAN 28 2010

File with:

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

Fill in dates:

Reporting Period Beginning	Month	Date	Year	Ending	Month	Date	Year
	10	26	2009		01	20	2010

Type of report: (Check one)

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

J. Michael McGorty

Full Name of Candidate (if applicable)

CITY COUNCILOR - AT-LARGE

Office Sought and District

73 HUTCHINSON DR.

Residential Address

MANLBOROUGH, MA 01752 (508)4813564

Tel. No. (optional)

McGorty for Councilor

Committee Name

ANNA MCGORTY

Name of Committee Treasurer

73 HUTCHINSON DR.

Committee Mailing Address

MANLBOROUGH, MA 01752 508 481 3564

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>-0-</u>
Line 3: Subtotal (line 1 plus line 2)	\$	<u>213.98</u>
Line 4: Total expenditures this period (page 3, line 14)	\$	<u>-0-</u>
Line 5: Ending balance (line 3 minus line 4)	\$	<u>213.98</u>

Line 6: Total in-kind contributions this period (page 4)	\$	<u>-0-</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$	<u>682.25</u>
Line 8: Name of bank(s) used		<u>CITIZENS 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 McGorty
Treasurer's signature (in ink)

Signed under the penalties of perjury:

1-28-10
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)

1/28/10
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)
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD		0-	Enter on page 1, line 2	

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.
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	
Line 12: Expenditures over \$50					
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES					- 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
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
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.

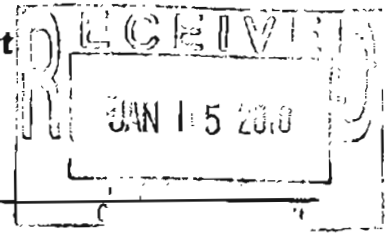
Date Incurred	To Whom Due	Address	Purpose	Amount
10/4/09	MetroWest Printing	160 Main St Methuen MA 01752	Printing	652.25
Line 18: OUTSTANDING LIABILITIES (ALL)				

Enter on page 1, line 7



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance



File with:

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

Fill in dates:

Reporting Period Beginning January 1 2009 Ending December 31 2009

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 Boston St. Marlboro, MA 01528
Residential Address
Tel. No. (optional)

Committee to Elect Sean Navin
Committee Name
Joseph Navin
Name of Committee Treasurer
154 Woodridge Rd. Marlboro, MA 01522
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>0.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>742.30</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>0.00</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>0.00</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:

Treasurer's signature (in ink) Joseph M. Navin Date 1/4/10

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) Sean Navin Date 1-4-10

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)
Line 9: Total receipts in excess of \$50 (or listed above)		0	00	Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)		0	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		0	00	

* 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	
Line 12: Expenditures over \$50				0	00
Line 13: Expenditures \$50 and under*				0	00
Line 14: TOTAL EXPENDITURES				0	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
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	236 1/2 Boston St.	Loan from	
	(Loan)	Marlborough, MA	Candidate	\$1,000.00
Line 18: OUTSTANDING LIABILITIES (ALL)				\$1,000.00

Enter on page 1, line 7

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



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

JAN 22 2010

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

Fill in dates:

Reporting Period Beginning	Month	Date	Year	Ending	Month	Date	Year
	10	27	2009		12	31	2009

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)

Council at Large
Office Sought and District

108 Upland Rd
Residential Address

Marlborough MA 01752
Tel. No. (optional)

Oram Campaign Committee
Committee Name

Mark E. Flanis
Name of Committee Treasurer

61 Woodland Road
Committee Mailing Address

Helden MA 01520
Tel. No. (optional)

(508) 829-9141

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 79.50

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

Line 3: Subtotal (line 1 plus line 2) \$ 79.50

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

Line 5: Ending balance (line 3 minus line 4) \$ 79.50

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

Line 7: Total (all) outstanding liabilities (page 4) \$ 10071.06

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.

[Signature] Signed under the penalties of perjury: 1/26/10
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

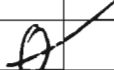
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this 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: 01-22-10
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)
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD				Enter on page 1, line 2

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

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	
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 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	
			Line 16: In-kind \$50 and under	
Enter on page 1, line 6			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
* ALL Prior to 10/26/09	Mark A Oram	108 Upland Road Marlborough MA	Loans to Campaigns	10,071.06
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	10071.06

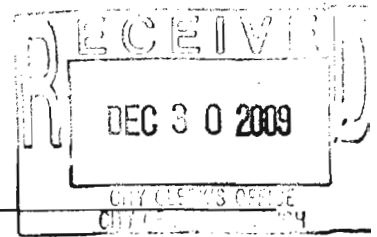
* Jan 1997 - 10/09



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance



File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning ^{Month} OCT ^{Date} 23 ^{Year} 2009 Ending ^{Month} DEC ^{Date} 31 ^{Year} 2009

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	\$	<u>Ø</u>
Line 2: Total receipts this period (page 2, line 11)	\$	<u>30.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$	<u>30.00</u>
Line 4: Total expenditures this period (page 3, line 14)	\$	<u>30.00</u>
Line 5: Ending balance (line 3 minus line 4)	\$	<u>Ø</u>

Line 6: Total in-kind contributions this period (page 4)	\$	<u>Ø</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$	<u>Ø</u>
Line 8: Name of bank(s) used		<u>CENTRAL ONE FEDERAL 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) N/A

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) [Signature]

Date 12/30/09

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)
10/23/09	MICHAEL OSSING 43 VALLEY ROAD	30	00	CANDIDATE
Line 9: Total receipts in excess of \$50 (or listed above)		30	00	
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD		30	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	
10/23/09	GEMINI SIGN	128 SOUTH BOSTON MARLBORO MA	YARD SIGN POST	30	00
Line 12: Expenditures over \$50				30	00
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				30	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	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.

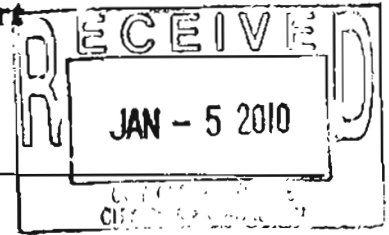
Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	0



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance



File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning Month 10 Date 25 Year 2009 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 Polewaczyc
 Full Name of Candidate (if applicable)
Councilor at Large
 Office Sought and District
28 Pleasant St
 Residential Address
 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 \$ 140.74
 Line 2: Total receipts this period (page 2, line 11) \$ 1000.00
 Line 3: Subtotal (line 1 plus line 2) \$ 1140.74
 Line 4: Total expenditures this period (page 3, line 14) \$ 0
 Line 5: Ending balance (line 3 minus line 4) \$ 1140.74
 Line 6: Total in-kind contributions this period (page 4) \$ 1000.00
 Line 7: Total (all) outstanding liabilities (page 4) \$ 0
 Line 8: Name of bank(s) used St Marys 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

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

Paul Polewaczyc

12-31-09

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)
10/26	Bob Dolan 310 Elm ST	500 00	Plumbing Contractor
10/29	Steve Polewacyk ^{106 Hill} Walliston VT	500 00	brew Pub business owner
Line 9: Total receipts in excess of \$50 (or listed above)			
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1000 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
10/26	Bob Dular	310 Elm ST	Cash	500.00
10/29	Steve Polowayk	Nob Hill Williston VT	Brew pub business owner	500.00
Line 15: In-kind over \$50				1000.00
Line 16: In-kind \$50 and under				0
Line 17: Total In-kind				1000.00

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
Line 18: OUTSTANDING LIABILITIES (ALL)				0

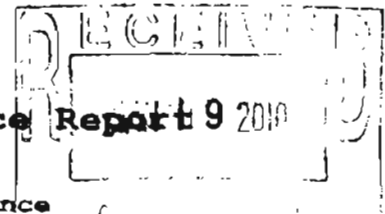
Enter on page 1, line 7



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report 9 2010
Municipal Form

Office of Campaign and Political Finance



File with:
City or Town Clerk or Election Commission

1/18/2010

Reporting Period - Beginning: 10/17/2009 Ending: 1/18/2010

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	42 Helen Drive
Marlborough, MA 01752	Marlborough, MA 01752
Residential Address	Committee Address

SUMMARY BALANCE INFORMATION

Ending Balance from previous report:	\$5,398.83
Total receipts this period:	\$1,050.00
Subtotal:	\$6,448.83
Total expenditures this period:	\$5,741.08
Ending Balance:	\$707.75
<hr/>	
Total in-kind contributions this period:	\$195.00
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 Bagley
Treasurer's signature (in ink)

1/19/2010
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

January 19, 2010

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	

Schedule A: Receipts

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipt 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
10/31/2009	Kennedy, Dennis 80 Cameron Drive Marlborough, MA 01752	\$200.00	Restaurant Owner Kennedy's Irish Pub,
10/31/2009	Kennedy, Michael 80 Cameron Drive Marlborough, MA 01752	\$200.00	Restaurant Kennedy's Irish Pub,
10/17/2009	Prunier, Chanel 43 Shirley Road Shrewsbury, MA 01545	\$100.00	
10/31/2009	Rowe, Douglas 540 Concord Road Marlborough, MA 01752	\$175.00	
10/30/2009	Tuttle, Wes Red Spring Road Marlborough, MA 01752	\$100.00	
Total Itemized Receipts		\$775.00	
Total Unitemized Receipts		\$275.00	
Total Receipts		\$1,050.00	

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
10/24/2009	Bj's Wholesale Club 290 Turnpike Road Westborough, MA 01580	\$90.03	Campaign Event
10/29/2009	Bj's Wholesale Club 290 Turnpike Road Westborough, MA 01580	\$55.94	Campaign Event
10/29/2009	Bj's Wholesale Club 290 Turnpike Road Westborough, MA 01580	\$31.84	Campaign Event
10/22/2009	Connolly Printing 300 Salem Street Woburn, MA 01801	\$4,764.90	Campaign Mailer
11/3/2009	Firefly's 350 East Main Street Marlborough, MA 01752	\$106.25	Election Night
11/1/2009	Hannaford Supermarket 193 Boston Post Road West Marlborough, MA 01752	\$57.54	Election Night
11/2/2009	Hannaford Supermarket 193 Boston Post Road West Marlborough, MA 01752	\$40.64	Campaign Event
11/3/2009	Main Street Cafe 182 Main Street Marlborough, MA 01752	\$80.95	Election Day
10/27/2009	Main Street Journal 186 Main Street Marlborough, MA 01752	\$291.00	Campaign Ads
10/22/2009	United States Postal Service Northborough, MA 01532	\$44.00	Postage
Total Itemized Expenditures		\$5,563.09	
Total Unitemized Expenditures		\$177.99	
Total Expenditures		\$5,741.08	

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
11/1/2009	Kennedy's Irish Pub, Inc Route 85 Marlborough, MA 01752	\$195.00	Fundraiser
Total Itemized In-kind Contributions		\$195.00	
Total Unitemized In-kind Contributions		\$0.00	
Total In-kind Contributions		\$195.00	



MASSACHUSETTS
JAN - 8 2010

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with:

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

Fill in dates:

Reporting Period Beginning 1 / 23 / 08 Ending 1 / 1 / 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, MA

Residential Address

Tel. No. (optional)

Katie Robey Committee

Committee Name

Eric Bau

Name of Committee Treasurer

97 Hudson St, Marlborough, MA

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$	<u>0.00</u>
Line 2: Total receipts this period (page 2, line 11)	\$	<u>0.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$	<u>0.00</u>
Line 4: Total expenditures this period (page 3, line 14)	\$	<u>0.00</u>
Line 5: Ending balance (line 3 minus line 4)	\$	<u>0.00</u>

Line 6: Total in-kind contributions this period (page 4)	\$	<u>0.00</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$	<u>1967.86</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 Bau

Signed under the penalties of perjury:

1/2/2010

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:

Kathleen D Robey

1/1/2010

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)
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD		0	Enter on page 1, line 2	

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.
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	
			Line 16: In-kind \$50 and under	
Enter on page 1, line 6			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.

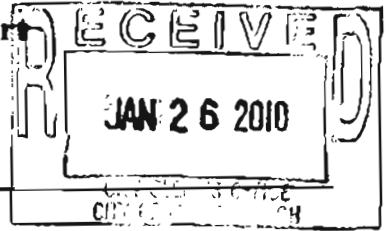
SCHEDULE D: LIABILITIES

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	" "	" "	" "	6496
11/3/07	" "	" "	" "	438.00
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	1967.86



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



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

Fill in dates:
Reporting Period Beginning 01 28 09 Ending 01 24 10

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

SCOTT D SCHAFER
Full Name of Candidate (if applicable)
CITY COUNCIL WARD 3
Office Sought and District
15 MACMURDO ST
Residential Address
MARLBOROUGH MA
Tel. No. (optional)

Committee to Elect Scott Schaffer
Committee Name
Lisa Boles
Name of Committee Treasurer
6 STEARNS RD
Committee Mailing Address
MARLBOROUGH MA 0152
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) \$ 3,260.31

Line 8: Name of bank(s) used ST. MARUS 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 Boles Signed under the penalties of perjury: 1/23/10
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 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.
ROBERT J. ... Signed under the penalties of perjury: 1/23/10
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)
Line 9: Total receipts in excess of \$50 (or listed above)		0 00	
Line 10: Total receipts \$50 and under* (not listed above)		0 00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		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.
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.

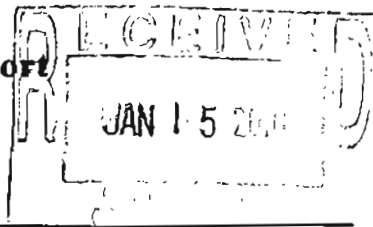
Date Incurred	To Whom Due	Address	Purpose	Amount	
Various	Scott D. Schaffer	15 MACAMBER LN MARLBOROUGH MA	Various Loans to campaign 2003-2007	3,260.31	
				Line 18: OUTSTANDING LIABILITIES (ALL)	3,260.31

Enter on page 1, line 7



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

Office of Campaign and Political Finance



File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning 10 / 27 / 09 Ending 1 / 11 / 10

Type of report: (Check one)

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

Robert M Seymour
Full Name of Candidate (if applicable)
Ward 5 Councilman
Office Sought and District
17 Kenney Lane
Residential Address
Marlborough MA
Tel. No. (optional)

Committee to Elect Robert Seymour
Committee Name
Christine Seymour
Name of Committee Treasurer
17 Kenney Lane
Committee Mailing Address
Marlborough MA
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 1,229.86
Line 2: Total receipts this period (page 2, line 11) \$ 0
Line 3: Subtotal (line 1 plus line 2) \$ 1,229.86
Line 4: Total expenditures this period (page 3, line 14) \$ 0
Line 5: Ending balance (line 3 minus line 4) \$ 1,229.86
Line 6: Total in-kind contributions this period (page 4) \$ N/A
Line 7: Total (all) outstanding liabilities (page 4) \$ N/A
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:

Treasurer's signature (in ink)

Christine Seymour

Date

1/11/10

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)

[Signature]

Date

1/11/10

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		
				Line 15: In-kind over \$50
				Line 16: In-kind \$50 and under
				Line 17: Total In-kind

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		
				Line 18: OUTSTANDING LIABILITIES (ALL)

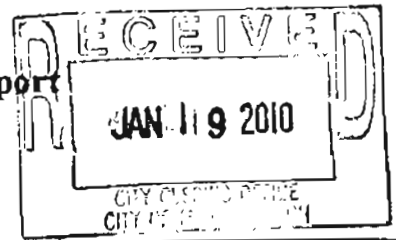
Enter on page 1, line 7



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance



File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning	Month	Day	Year	Ending	Month	Day	Year
	10	26	2009		12	31	2009

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 Sandini Rd, Marlborough, MA
Residential Address

508 481 4605
Tel. No. (optional)

Committee to Elect George Stein
Committee Name

Mary Ann Stein
Name of Committee Treasurer

28 Sandini Rd, Marlborough, MA
Committee Mailing Address

508 481 4605
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ 51.02
Line 2: Total receipts this period (page 2, line 11)	\$ 390.72
Line 3: Subtotal (line 1 plus line 2)	\$ 441.74
Line 4: Total expenditures this period (page 3, line 14)	\$ 320.72
Line 5: Ending balance (line 3 minus line 4)	\$ 121.02
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	<u>Marlborough Savings 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:

Mary Ann Stein
Treasurer's signature (in ink)

1/18/10
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:

George Stein
Candidate signature (in ink)

1/18/10
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)
Various	George Stein 28 Sandin Rd, Marlborough, MA	320	72	
Line 9: Total receipts in excess of \$50 (or listed above)		320	72	
Line 10: Total receipts \$50 and under* (not listed above)		70	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		390	72	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	
11/3/09	Coral Seafood	29 S. Bolton St. Marlborough, MA	"Thank you" event	300	00
11/2/09	Dollar Tree	193 Boston Post Rd Marlborough, MA	Balloons, decorations	20	72
Line 12: Expenditures over \$50				320	72
Line 13: Expenditures \$50 and under*				20	72
Line 14: TOTAL EXPENDITURES				320	72

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.

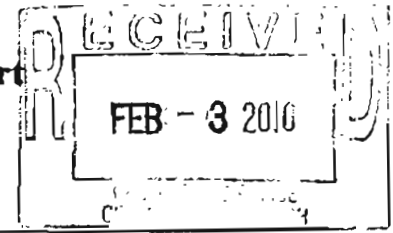
SCHEDULE D: LIABILITIES

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
various	George Stein	28 Sandini Rd Marlborough, MA 01752	Loan	632.73
various	George Stein	28 Sandini Rd Marlborough, MA 01752	Loan	1129.08
various	George Stein	28 Sandini Rd Marlborough, MA 01752	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



File with:

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

Fill in dates:
 Reporting Period Beginning Month 10 Date 26 Year 2009 Ending Month 1 Date 20 Year 2010

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

Full Name of Candidate (if applicable)
Nancy E. Stevens
 Office Sought and District
Mayor
 Residential Address
242 De Simone Dr.
Marlborough, MA 01752 Tel. No. (optional)

Committee to Elect Nancy Stevens
 Committee Name
Penny Aber-Kaku
 Name of Committee Treasurer
242 De Simone Dr.
 Committee Mailing Address
Marlborough, MA 01752 Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>12061.09</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>6745.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>18806.09</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>4391.94</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>14414.15</u>

Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>12,000.00</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:

Penny Aber-Kaku Treasurer's signature (in ink) 1/25/10 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:

Nancy E. Stevens Candidate signature (in ink) 1/29/10 Date

1/20/2010 NANCY STEVENS FINANCE REPORT

First Name	Last Name	Amount	Date Rec	Date Dep	Street	City	State	Zip	Occupation	Employer
Total:		\$6,745.00						40		
Joseph	Baldiga	\$50.00	10/16/2009	11/8/2009	3 Falcon Ridge Dr.	Hopkinton	MA	01748		
Edward	Bassett	\$50.00	10/16/2009	11/8/2009	79 Sears Rd.	Southborough	MA	01772		
John	Bechard	\$50.00	10/23/2009	11/9/2009	3 Countryside Rd.	N. Grafton	MA	01536		Self
Arthur	Bergeron	\$500.00	10/25/2009	11/8/2009	54 Shea Dr.	Marlborough	MA	01752	Lawyer	
Robert	Clark	\$200.00	10/30/2009	11/8/2009	584 Berlin Rd.	Marlborough	MA	01752	Comm. Tech.	Framingham State College
Joseph	Connolly, Esq.	\$100.00	11/2/2009	11/8/2009	74 Main St	Marlborough	MA	01752		
Paul & Filomena	Connor	\$50.00	10/28/2009	11/8/2009	297 DeSimone Dr.	Marlborough	MA	01752		
Peter	Dawson	\$100.00	10/16/2009	11/8/2009	10 Shanandoah Dr.	Paxton	MA	01812		
William	Deplethi	\$200.00	10/20/2009	11/8/2009	15 Presidential Dr.	Southborough	MA	01772	Owner	Capital Group Properties
Brian	Dingman	\$50.00	10/16/2009	11/8/2009	1700 W. Park Dr. Suite 305	Westborough	MA	01581		
Paul & Patricia	DiTullio	\$100.00	10/24/2009	11/8/2009	274 Brigham St	Marlborough	MA	01752		
Paul	D'Onfro	\$100.00	10/16/2009	11/8/2009	100 Front St	Worcester	MA	01608		
Bill & Helen	Downey	\$50.00	10/23/2009	11/8/2009	185 Church St	Marlborough	MA	01752		
William	Downey, Jr.	\$100.00	11/3/2009	11/8/2009	1011 Concord Rd.	Marlborough	MA	01752		
Margaret	Dwyer	\$200.00	11/2/2009	11/8/2009	33 Spoonhill Ave.	Marlborough	MA	01752		Self
Lizetti	Fries	\$100.00	10/30/2009	11/8/2009	10 Cortland Dr.	Hudson	MA	01749		
Theofilos	Gergos	\$100.00	10/24/2009	11/8/2009	22 Penny Lane	Milford	MA	01757		
Robert	Gibbons	\$100.00	10/16/2009	11/8/2009	60 Walnut St	Clinton	MA	01510		
Manilyn	Gorka	\$50.00	10/27/2009	11/8/2009	119 Ahlgren Circle	Marlborough	MA	01752		
Arthur	Gutierrez, Jr.	\$200.00	10/17/2009	11/8/2009	8 Claridge Dr.	Weston	MA	02483	developer	self
Joseph	Hamilton	\$50.00	10/16/2009	11/8/2009	44 Valentine Rd.	Northborough	MA	01532		
Jennifer	Johnston	\$100.00	11/2/2009	11/8/2009	20 Lamare Dr.	Marlborough	MA	01752		
John	Mirck	\$100.00	10/16/2009	11/8/2009	180 Mirck Rd.	Princeton	MA	01641		
Gregory	Mitrikas	\$100.00	10/27/2009	11/8/2009	230 Simpson Rd.	Marlborough	MA	01752		
Janet	Moore	\$100.00	10/16/2009	11/8/2009	429 North St	Jefferson	MA	01522		
D. M.	Moschos	\$200.00	10/16/2009	11/8/2009	100 Front St, Suite 1700	Worcester	MA	01608	Attorney	Minck O'Connell
Mary Jo	Nawrocki	\$50.00	11/3/2009	11/8/2009	337 Brigham St	Marlborough	MA	01752		
William	Pazzoni	\$50.00	10/16/2009	11/9/2009	23 Presidential Dr.	Southborough	MA	01772		
Douglas	Rowe	\$175.00	10/24/2009	11/8/2009	540 Concord Rd.	Marlborough	MA	01752	Attorney	Self
Maurice	Ryan	\$500.00	10/24/2009	11/9/2009	242 Elsinore St	Concord	MA	01742	Comm. Real Estate	15 Sawiri LLC
Susan	Ryan	\$500.00	10/24/2009	11/8/2009	242 Elsinore St	Concord	MA	01742	Comm. Real Estate	15 Sawiri LLC
Bruce	Saluk	\$100.00	10/27/2009	11/8/2009	359 Chestnut St	Hudson	MA	01749		
Karen	Seekamp	\$20.00	10/26/2009	11/8/2009	18 Pearl St	Marlborough	MA	01752		
Thomas & Patricia	Teager	\$400.00	10/27/2009	11/8/2009	190 Rolling Meadow Dr.	Holliston	MA	01746	business owner	ForeKicks
Marc	Terry	\$50.00	10/16/2009	11/8/2009	11 Lorraine Dr.	Ashland	MA	01721		
Robert	Valchuis	\$500.00	10/21/2009	11/8/2009	180 Farm Rd. Box 306	Marlborough	MA	01752	?	Self
Richard	Van Nostrand	\$200.00	10/16/2009	11/8/2009	100 Front St	Worcester	MA	01608	Attorney	Minck O'Connell
David	Watson	\$500.00	10/24/2009	11/8/2009	178 Prairie St	Concord	MA	01742	owner	Patriot Ambulance
Gail	Watson	\$500.00	10/24/2009	11/8/2009	178 Prairie St	Concord	MA	01742	manager	Patriot Ambulance
David & Debra	Winske	\$100.00	10/30/2009	11/8/2009	271 Farm Rd.	Marlborough	MA	01752		

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)
	See attached	list	
Line 9: Total receipts in excess of \$50 (or listed above)		6745 00	
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		6745 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				
Line 16: In-kind \$50 and under				N/A
Line 17: Total In-kind				

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
9/26/05	Nancy Stevens	242 DeSimone Dr. Marlborough, MA 01752	loan for campaign	5000.00
8/12/05	Same	Same	Same	5000.00
9/4/03	Same	Same	Same	1500.00
7/23/03	Same	Same	Same	500.00
Line 18: OUTSTANDING LIABILITIES (ALL)				12,000.00

Enter on page 1, line 7

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)
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD				Enter on page 1, line 2

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.
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	
Enter on page 1, line 6			Line 16: In-kind \$50 and under	
Enter on page 1, line 6			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			Line 18: OUTSTANDING LIABILITIES (ALL)	

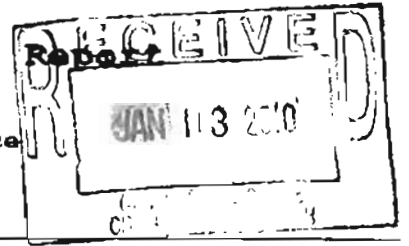
This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report
Municipal Form

Office of Campaign and Political Finance



File with:
City or Town Clerk or Election Commission

1/12/2010

Reporting Period - Beginning: 10/17/2009 Ending: 12/31/2009

Type of report: Year-end

Arthur Vigeant <i>Full Name of Candidate</i>	Committee to Elect Arthur G. Vigeant <i>Committee Name</i>
City Councilor at Large	Stephen Vigeant <i>Name of Committee Treasurer</i>
<i>Office Sought/ District</i>	<i>Name of Committee Treasurer</i>
186 Main Street	186 Main Street
Marlborough, MA 01752	Marlborough, MA 01752
<i>Residential Address</i>	<i>Committee Address</i>

SUMMARY BALANCE INFORMATION

Ending Balance from previous report:	\$432.27
Total receipts this period:	\$8,626.21
Subtotal:	\$9,058.48
Total expenditures this period:	\$3,597.70
Ending Balance:	\$5,460.78
Total in-kind contributions this period:	\$0.00
Total outstanding liabilities:	\$12,423.31
Name of bank(s) used:	Butler Bank

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury:

Treasurer's signature (in ink)

1/12/10
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:

1/14/10

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
11/6/2009	BAHOSH, Mary Jo 21 Red Spring Road Marlboro, MA 01752	\$100.00	INFORMATION REQUESTED
11/6/2009	Barry, James 35 Jackson Circle Marlborough, MA 01752	\$100.00	Vice-President Boston Scientific Corp
10/23/2009	BERGERON, Arthur 54 SHEA DRIVE Marlborough, MA 01752	\$100.00	ATTORNEY SELF
10/20/2009	Bisol, Joseph 212 Hudson St Marlborough, MA 01752	\$100.00	Accounting Supervisor Letter Sent
10/20/2009	BONIN, Walter 64 COUNTRY LANE Marlborough, MA 01752	\$100.00	FINANCIAL ADVISOR SELF
10/20/2009	BOULE, Gerard 46 E. DUDLEY STREET Marlborough, MA 01752	\$100.00	
10/20/2009	CONNOLLY, Joseph 74 MAIN STREET Marlborough, MA 01752	\$100.00	LAWYER SELF EMPLOYED
10/23/2009	CONNORS, Robert 10 HUNDREDS ROAD WESTBORO, MA 01581	\$200.00	REAL ESTATE MANAGEMENT SELF
10/20/2009	DERECH, Carole 68 CHANDLER STREET Marlborough, MA 01752	\$100.00	Sales Insight
10/19/2009	DESIMONE, Emilio 147 SOUTH STREET Marlboro, MA 01752	\$100.00	RETIRED

Date	Name and Residential Address	Amount	Occupation and Employer
10/20/2009	Giroux, James 8 Naugler Ave Marlborough, MA 01752	\$75.00	
10/20/2009	Gutierrez Jr, Arthur 8 Claridge Dr Weston, MA 02493	\$200.00	Real Estate Developer Gutierrez Company
10/20/2009	HARGRAVE, Alfred 19 POWERLINE ROAD Grafton, MA 01519	\$100.00	C P A SELF
11/6/2009	Hart, Kevin 224 Gates Pond Road Berlin, MA 01503	\$100.00	
10/19/2009	Higgins, James 20 Lamarre Drive Marlboro, MA 01752	\$100.00	
10/20/2009	HOGAN, Michael 33 SPOONHILL AVENUE Marlborough, MA 01752	\$250.00	President & CEO A D Makepeace Co
10/23/2009	JAROSZ, Joseph Andrew 76 POOR FARM ROAD Harvard, MA 01451	\$100.00	DDS
11/6/2009	KABOOLIAN, Linda 23 HIGHLAND ST Cambridge, MA 02138	\$200.00	Professor Harvard University
10/23/2009	LANGELIER, Nancy 191 CHURCH STREET Marlboro, MA 01752	\$75.00	
10/20/2009	McCARTHY, Daniel 14 PINECONE LANE Southborough, MA 01772	\$100.00	C P A SELF
11/6/2009	MITRAKAS, Gregory 39 VARLEY RD Marlborough, MA 01752	\$200.00	ATTORNEY SELF
11/6/2009	MOINEAU, Joseph 58 E. DUDLEY STREET Marlborough, MA 01752	\$100.00	MANUFACTURER AUTOMATIC SPECIALTIES,

Date	Name and Residential Address	Amount	Occupation and Employer
10/23/2009	Murphy, Brian 34 Alan Road Marlborough, MA 01752	\$400.00	Energy Consultant Colonial Power Group,
10/19/2009	NATALE, James 53 RIPLEY AVENUE Marlboro, MA 01752	\$100.00	
11/6/2009	NAVES, Dora 133 SHAWMUT AVENUE MARLBOROUGH, MA 01752	\$100.00	REALTOR DORA NAVES & ASSOCIATE
10/19/2009	O'Malley, Michael One Kelly Lane Hudson, MA 01749	\$100.00	
10/19/2009	Pinzino, James 44 Warren Avenue Marlborough, MA 01752	\$100.00	
11/6/2009	RICHER, Gerard Paul 8 WOLFEN LANE Southborough, MA 01772	\$100.00	ATTORNEY SELF
11/6/2009	ROWE, Douglas 540 CONCORD ROAD Marlboro, MA 01752	\$175.00	ATTORNEY SELF
10/23/2009	Ryan, Maurice 242 Elsinore St Concord, MA 01742	\$500.00	Owner Patriot Ambulance
11/6/2009	Ryan, Susan 242 Elsinore St Concord, MA 01742	\$500.00	Manager Patriot Ambulance
11/6/2009	SALUK, Bruce 359 CHESTNUT STREET Hudson, MA 01749	\$100.00	CIVIL ENGINEER SELF
10/20/2009	SHAY, Joseph 3 WYNDEMERE DRIVE Southborough, MA 01772	\$250.00	CO PRESIDENT KENS FOODS
10/20/2009	Shepard, Jamie 72 Donahue Drive Marlborough, MA 01752	\$250.00	Sales ICI CORP

Date	Name and Residential Address	Amount	Occupation and Employer
11/6/2009	Silva Jr., David E 343 Forest St Marlborough, MA 01752	\$100.00	
10/20/2009	SULLIVAN, Suzanne 149 BROAD STREET Marlborough, MA 01752	\$60.00	
10/20/2009	TOKARCZYK, Lynn 110 TWINBROOK LANE Bellingham, MA 02019	\$100.00	
10/19/2009	TROLLA, Joseph 58 Tea Party Way Malden, MA 02148	\$100.00	CONSTRUCTION FAFFARD CONST CO
11/6/2009	VALCHUIS, Robert 180 FARM ROAD Marlborough, MA 01752	\$500.00	SALVAGE SELF
11/6/2009	VIGEANT, Phyllis 48 GLEASON STREET MARLBOROUGH, MA 01752	\$100.00	
10/23/2009	Walton, David 178 Prairie St Concord, MA 01742	\$500.00	CEO Patriot Ambulance
10/20/2009	Weiss, Scott 28 Wildwood Drive Southborough, MA 01772	\$100.00	
11/6/2009	WINSKE, David 271 FARM ROAD Marlborough, MA 01752	\$100.00	Contractor Self
Total Itemized Receipts		\$7,035.00	
Total Unitemized Receipts		\$1,591.21	
Total Receipts		\$8,626.21	

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
10/20/2009	Coalition For Marriage & Family 4000 West Cummings Park Woburn, MA 01801	\$100.00	Advertising
11/5/2009	Kathy Fausnacht 15 Jackson Circle Franklin, MA 02038	\$175.50	Office Help
12/14/2009	Marlborough Historical Society, Inc. P O Box 513 Marlborough, MA 01752	\$100.00	Advertising
11/5/2009	Marlborough Rotary Club Main Street Marlborough, MA 01752	\$75.00	Event
10/30/2009	Metrowest Printing 160 Main Street Marlborough, MA 01752	\$3,011.70	Printing
11/24/2009	The Charlie Baker Committee 70 Fargo Street Boston, MA 02210	\$100.00	Donation
Total Itemized Expenditures		\$3,562.20	
Total Unitemized Expenditures		\$35.50	
Total Expenditures		\$3,597.70	

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.

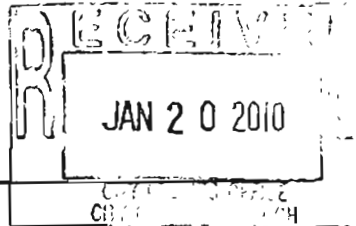
Date	To Whom Due	Amount	Purpose
12/31/2003	ARTHUR VIGEANT 650 PLEASANT STREET MARLBOROUGH, MA 01752	\$5,000.00	LOAN
10/30/2008	Arthur Vigeant 650 Pleasant Street Marlborough, MA 01752	\$3,966.05	Printing
11/3/2008	Arthur Vigeant 650 PLEASANT STREET Marlborough, MA 01752	\$3,457.26	Printing
Total Outstanding Liabilities		\$12,423.31	



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance



File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

CITY OF MARLBOROUGH
CIVIL SERVICE CENTER

Fill in dates:

Reporting Period Beginning Month 01 / Date 01 / Year 2009 Ending Month 01 / Date 15 / Year 2010

Type of report: (Check one)

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

MAURA NAVIN WEBSTER

Full Name of Candidate (if applicable)

Ward 5 City Council

Office Sought and District

154 WOODRIDGE ROAD

Residential Address

Tel. No. (optional)

Committee to Elect Maura Navin Webster

Committee Name

Philip Carroll

Name of Committee Treasurer

154 Woodridge Rd. Marlborough, MA

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ 89.37
Line 2: Total receipts this period (page 2, line 11)	\$ 0
Line 3: Subtotal (line 1 plus line 2)	\$ 89.37
Line 4: Total expenditures this period (page 3, line 14)	\$ 89.37
Line 5: Ending balance (line 3 minus line 4)	\$ 0

Line 6: Total in-kind contributions this period (page 4)	\$ 774.88
Line 7: Total (all) outstanding liabilities (page 4)	\$ 0
Line 8: Name of bank(s) used	<u>Marlborough Savings 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:

Philip Carroll
Treasurer's signature (in ink)

1/15/2010
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:

Maura Navin Webster
Candidate signature (in ink)

1/15/10
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)
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD				Enter on page 1, line 2

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

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	
1/15/10	Maura Webster	154 Woodridge Rd Marlborough, MA	Partial payment of loan	89	37
Line 12: Expenditures over \$50					
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES			89	37	

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
1/15/10	Maura Navin Webster	154 Woodridge Rd Marlborough, MA 01752	Forgiveness of loan	774.88
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	774.88

* 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)	