

Form CPF M 102: Campaign Finance Report

Municipal Form

RECEIVED CITY CLERK'S OFFICE CLEY CE MARLBOROUGH

Office of Campaign and Political Finance

of Massachusetts		File with	2921 JAN 19 City or Town Clerk of	Alection Polymission
Fill in Reporting Period dates: Beginning Date: 1/1/20)20	Ending Date:	12/31/2020	Licetion Commission
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election [☐ 30 day	after election 🔀 ye	ear-end report	dissolution
Samantha Periman	Committee to Elect Samantha Perlman Committee Name			
Candidate Full Name (if applicable) City Councilor At-Large	Kayleigh		ittee Name	
Office Sought and District	Kayleigh Parravicini Name of Committee Treasurer			
43 Washington Street #1, Marlborough, MA 01752	PO Box 1072 Marlborough, MA 01752			
Residential Address	Committee Mailing Address			
E-mail: campaign@samanthaperlman.org	E-mail: campaign@samanthaperlman.org			.org
Phone # (optional):	Phone # (optional):			
SUMMARY BALANC	E INFO	RMATION:		
Line 1: Ending Balance from previous report			6,011.22	
Line 2: Total receipts this period (page 3, line 11)			347	
Line 3: Subtotal (line 1 plus line 2)			6,358.22	
Line 4: Total expenditures this period (page 5, line 14)			1,042.24	
Line 5: Ending Balance (line 3 minus line 4)			5,315.98	
Line 6: Total in-kind contributions this period (page 6)				
Line 7: Total (all) outstanding liabilities (page 7)			0	
Line 8: Name of bank(s) used: DCU Credit Union				
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind c finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:	ontributions	and liabilities for this reporting	g period and represents	the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	r only)		(6	
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting	best of my k	n the requirements of M.G.L. o	c. 55. I have not receive	
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.				
Signed under the penalties of perjury: Candidate's signature Date: 1/17/2021				

SCHEDULE A: RECEIPTS

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

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	
11/23/2020	Nick Alto 346 Nichols Street Norwood, MA 02062	250	Consultant, LTO Strategies	
Line 9: Total Rece	eipts over \$50 (or listed above)	250		
Line 10: Total Receipts \$50 and under* (not listed above)		97		
Line 11: TOTAL	RECEIPTS IN THE PERIOD	347	← Enter on page 1, line 2	

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

SCHEDULE B: EXPENDITURES

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

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

cport an expen	To Whom Paid	nittee name and a page number or	reach page.)	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
3/3/2020	Marlborough U.S. Post Office	20 Florence St, Marlborough, MA 01752	Renewal of 1-year PO Box rental	150
3/31/2020	Mass Democratic State Party	11 Beacon St, Suite 410 Boston, MA 02108	Votebuilder renewal	700
4/28/2020	wix	Online Platform	WIX Website renewal	178.5
	-1	Line 12: Total Expenditures over \$50 (or listed above)		1,028.5
		Line 13: Total Expenditures \$50 and under* (not listed above)		
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD 1,0				1,042.24

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

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			*	
		Line 15: In-Kind Contributions over \$50 (or listed above)		0
		Line 16: In-Kind Contributions	12	
	Enter on page 1, line 6 →	e 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

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

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