



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

Fill in Reporting Period dates: Beginning Date: _____ Ending Date: _____

Type of Report: (Check one)

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

Joseph F Halligan
 Candidate Full Name (if applicable)
Planning Board
 Office Sought and District
1 Newell Drive
 Residential Address
 E-mail: **Joe Halligan 1959 @Gmail.com**
 Phone # (optional): **508-380-5750**

Committee Name
 Name of Committee Treasurer
 Committee Mailing Address
 E-mail:
 Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, line 14)	5410 ⁹⁴ / ₁₀₀
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury: _____ (Treasurer's signature) Date: _____

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

- Candidate with Committee**
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.
- Candidate without Committee**
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____ (Candidate's signature) Date: 10-25-21



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

Fill in Reporting Period dates: Beginning Date: 8/2/21 Ending Date: 10/25/21

Type of Report: (Check one)

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

Anthony D. Padula
Candidate Full Name (if applicable)

Planning Board
Office Sought and District

769 Washington St
Residential Address

E-mail: _____

Phone # (optional): _____

_____ Committee Name

_____ Name of Committee Treasurer

_____ Committee Mailing Address

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	_____
Line 2: Total receipts this period (page 3, line 11)	_____
Line 3: Subtotal (line 1 plus line 2)	_____
Line 4: Total expenditures this period (page 5, line 14)	<u>\$525⁰⁰</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0-</u>
Line 6: Total in-kind contributions this period (page 6)	_____
Line 7: Total (all) outstanding liabilities (page 7)	_____
Line 8: Name of bank(s) used:	_____

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury: _____ (Treasurer's signature) Date: _____

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

- Candidate with Committee**
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.
- Candidate without Committee**
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____ (Candidate's signature) Date: 10/25/21



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

Fill in Reporting Period dates: Beginning Date: October 20, 2021 Ending Date: December 21, 2021

Type of Report: (Check one)

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

Beth Wierling
Candidate Full Name (if applicable)

Planning Board
Office Sought and District

164 Main Street Franklin, MA 02038
Residential Address

E-mail: bethwierling4planning@gmail.com

Phone # (optional): 508-369-4168

Committee to Elect Beth A. Wierling
Committee Name

Robert A. Wierling
Name of Committee Treasurer

164 Main Street Franklin, MA 02038
Committee Mailing Address

E-mail: bethwierling4planning@gmail.com

Phone # (optional): 508-369-4168

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$100.73
Line 2: Total receipts this period (page 3, line 11)	\$.88
Line 3: Subtotal (line 1 plus line 2)	\$101.61
Line 4: Total expenditures this period (page 5, line 14)	\$101.61
Line 5: Ending Balance (line 3 minus line 4)	\$0
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	Dean 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: [Signature] (Treasurer's signature) Date: 12/4/21

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

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

Candidate without Committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 12/4/21



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

Fill in Reporting Period dates: Beginning Date: 8/9/21 Ending Date: 10/20/21

Type of Report: (Check one)

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

Beth Wierling
Candidate Full Name (if applicable)

Planning Board
Office Sought and District

164 Main Street
Residential Address

E-mail: bethwierling4planning@gmail.com

Phone # (optional): _____

Committee to Elect Beth A. Wierling
Committee Name

Robert A. Wierling
Name of Committee Treasurer

164 Main Street
Committee Mailing Address

E-mail: bethwierling4planning@gmail.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	\$2,381.23
Line 3: Subtotal (line 1 plus line 2)	\$2,381.23
Line 4: Total expenditures this period (page 5, line 14)	\$2,280.50
Line 5: Ending Balance (line 3 minus line 4)	100.73
Line 6: Total in-kind contributions this period (page 6)	\$45.16
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	Dean 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: [Signature] (Treasurer's signature)

Date: 10/20/21

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: [Signature] (Candidate's signature)

Date: 10/20/21

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)
August 19, 2021	Lloyd Brown	\$100.00	
October 10, 2021	George Celorier	\$100.00	
August 18, 2021	David and Ann Forsberg	\$250.00	
September 27, 2021	Karen and Francis Landers	\$50.00	Retired
August 30, 2021	Susan Macaione	\$100.00	
August 28, 2021	Mary and Kai Olsson	\$100.00	Network Engineer, CVS Health
August 21, 2021	Paul and Gail Shew	\$1,000.00	Retired
September 21, 2021	Roberta Trahan	\$50.00	
August 20, 2021	Robert Wierling	\$100.00	Network Engineer, CVS Health
September 28, 2021	Robert Wierling	\$100.00	Network Engineer, CVS Health
October 18, 2021	Beth Wierling	\$381.23	Planning & Construction Manager, The Kraft Group
Line 9: Total Receipts over \$50 (or listed above)		\$2,331.23	
Line 10: Total Receipts \$50 and under* (not listed above)		\$50.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$2,381.23	← 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Sept. 29, 2021	Allegra Marketing Print Mail	317 Union Street Franklin, MA 02038	Printing for Mailing, Handouts and Postage	\$1,230.86
Oct. 13, 2021	Maple Design Shop Aaron Frongillo	140 Maple Street Franklin, MA 02038	Campaign Design Package	\$250.00
Aug. 30, 2021	Signsonthecheap.com	Signsonthecheap.com	Yard Signs	\$357.52
Sept. 29, 2021	Signsonthecheap.com	signsonthecheap.com	Yard Signs	\$381.23
Line 12: Total Expenditures over \$50 (or listed above)				\$2,219.61
Line 13: Total Expenditures \$50 and under* (not listed above)				\$60.89
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$2,280.50

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.



Commonwealth of Massachusetts

Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE MUNICIPAL FORM

Office of Campaign and Political Finance

TOWN OF FRANKLIN
TOWN CLERK

File with: City / Town Clerk or Election Commission

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

CANDIDATE: Full Name: Jennifer Williams

Residential Address: 28 Queen Street

City / State / Zip: Franklin MA 02038

E-Mail Address: jenniferdeonwilliams@gmail.com Phone #: 857-205-5302

Party Affiliation: Democratic (If applicable)

OFFICE SOUGHT/PURPOSE:

Title: Planning Board Member

District: _____

COMMITTEE: Name of Committee: Committee to Elect Jennifer Williams
(The name of the committee must include the candidate's last name)

Committee Mailing Address: 28 Queen Street

City / State / Zip: Franklin MA 02039 Phone #: 857205502

OFFICERS:

Chairman: <u>Jennifer Williams</u>	Treasurer*: <u>Samuel Williams</u>
Residential Address: <u>28 Queen Street</u>	Residential Address: <u>28 Queen Street</u>
City / State / Zip: <u>Franklin</u> MA <u>02038</u>	City / State / Zip: <u>Franklin</u> MA <u>02038</u>
Phone #: <u>857205502</u>	Phone #: <u>9784572832</u> Email: <u>samuellviwilliams@gmail.com</u>
Other Officer/Title: _____	Other Officer/Title: _____
Residential Address: _____	Residential Address: _____
City / State / Zip: _____	City / State / Zip: _____
Phone #: _____	Phone #: _____

(Complete and attach a Form CPF M A 101, if necessary, with other officers and finance committee, if any.)

I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

Date: 9/8/21

I hereby accept the office of Treasurer of the above-named committee. I affirm that I am not a public employee as defined by M.G.L. c. 55, s. 13. I understand that: 1) I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election; 2) if after my acceptance of this office I become an appointed public employee, I must resign this position and notify OCPF of my resignation; and 3) a candidate may not serve as treasurer of the political committee organized on his/her behalf.

SIGNED UNDER THE PENALTIES OF PERJURY:

Date: 9/8/21

I hereby accept the office of Chairman of the above-named committee.
SIGNED UNDER THE PENALTIES OF PERJURY:

Chairman's signature

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

Fill in Reporting Period dates: Beginning Date: 9/13/21 Ending Date: 10/25/21

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

Jennifer Williams
Candidate Full Name (if applicable)
Planning Board
Office Sought and District
28 Queen St., Franklin, MA 02038
Residential Address
 E-mail: jenniferdeanwilliams@gmail.com
 Phone # (optional): 857-205-5302

Committee to Elect Jennifer Williams
Committee Name
Samuel Williams
Name of Committee Treasurer
28 Queen St, Franklin, MA 02038
Committee Mailing Address
 E-mail: samuelleriviwilliams@gmail.com
 Phone # (optional): 978-457-2032

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>—</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$918</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$918</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$418</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$500</u>
Line 6: Total in-kind contributions this period (page 6)	<u>—</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>\$418</u>
Line 8: Name of bank(s) used:	<u>Dean Bank</u>

Affidavit of Committee Treasurer:
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
 Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 10/25/2021

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

Candidate with Committee and no activity independent of the committee
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
 Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 10/25/21

Committee to Elect Jennifer Williams

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)
10/19/21	Michelle Belhumeur 905 Brookhaven Lane Wrentham, RI 02895	\$100	
10/9/21	Alison Carey 6 Russell St. Franklin, MA 02038	\$50	
9/15/21	Ed Dudley 14 Rivanna Rd Andover, MA 01810	\$50	
10/9/21	David Labente 360 Oak St. Franklin, MA 02038	\$50	
9/16/21	Tanya Moore 91 Conanza St. White Rock, NM 87547	\$25	
9/21/21	Sue Rheume 59 Box and Dr. Bellingham, MA 02038	\$100	
10/9/21	Jeffrey Roy 6 Lydia Lane Franklin, MA 02038	\$50	
9/13/21	Samuel Williams 20 Queen St. Franklin, MA 02038	\$25	
9/18/21 10/18/21	Practical tm Jennifer Williams 20 Queen St, Franklin, MA 02038	\$227.11 \$100	
9/30/21	Jennifer Williams 20 Queen St, Franklin, MA 02038	\$28.00	
10/1/21	Jennifer Williams 20 Queen St, Franklin, MA 02038	\$5.31	
10/9/21	Jennifer Williams 20 Queen St, Franklin, MA 02038	\$18.06	
Line 9: Total Receipts over \$50 (or listed above)		270	
Line 10: Total Receipts \$50 and under* (not listed above)		55	
Line 11: TOTAL RECEIPTS IN THE PERIOD			<input type="checkbox"/> 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.

Committee to Elect Jennifer Williams

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/9/21	Jennifer Williams 26 Queen St Franklin, MA 02038	\$139.52	
Line 9: Total Receipts over \$50 (or listed above)		\$ 868	
Line 10: Total Receipts \$50 and under* (not listed above)		350	
Line 11: TOTAL RECEIPTS IN THE PERIOD		5 918	

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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/8/21	Practical Image	763 Waverly St. 01702 Frammingham, MA	Campaign yard signs	\$227.11
9/15/21			Online Advertising	
10/9/21	Central Pizza	20 West Central St. Franklin, MA 02038	Food for Fundraising Event	\$139.52
10/1/21	Dollar Tree	264 Franklin Village Franklin, MA 02038	Decor for Event	\$5.31
9/30/21	CVS pharmacy	222 East Central St. Franklin, MA 02038	Candy for Event	\$28.00
10/9/21	Dollar Tree	264 Franklin Village Franklin, MA 02038	Decor for Fundraising Event	\$18.06
Line 12: Total Expenditures over \$50 (or listed above)				\$418.00
Line 13: Total Expenditures \$50 and under* (not listed above)			
Line 14: TOTAL EXPENDITURES IN THE PERIOD				418.00

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.



**Form CPF M101: STATEMENT OF ORGANIZATION
CANDIDATE'S COMMITTEE**

MUNICIPAL FORM OF FRANKLIN
TOWN CLERK
Office of Campaign and Political Finance

2021 SEP -9 P 4: 21

File with City / Town Clerk or Election Commission

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

CANDIDATE: Full Name: Jennifer Williams
 Residential Address: 28 Queen Street
 City / State / Zip: Franklin MA 02038
 E-Mail Address: jenniferdeonwilliams@gmail.com Phone #: 857-205-5302
 Party Affiliation: Democratic (If applicable)

OFFICE SOUGHT/PURPOSE:
 Title: Planning Board Member
 District: _____

COMMITTEE: Name of Committee: Committee to Elect Jennifer Williams
 (The name of the committee must include the candidate's last name)
 Committee Mailing Address: 28 Queen Street
 City / State / Zip: Franklin MA 02039 Phone #: 857205502

OFFICERS:

Chairman: <u>Jennifer Williams</u> Residential Address: <u>28 Queen Street</u> City / State / Zip: <u>Franklin</u> MA <u>02038</u> Phone #: <u>857205502</u>	Treasurer*: <u>Samuel Williams</u> Residential Address: <u>28 Queen Street</u> City / State / Zip: <u>Franklin</u> MA <u>02038</u> Phone #: <u>9784572832</u> Email: <u>samuellviviwilliams@gmail.com</u> <small>*A public employee may not serve as treasurer of any political committee (see reverse).</small>
Other Officer/Title: _____ Residential Address: _____ City / State / Zip: _____ Phone #: _____	Other Officer/Title: _____ Residential Address: _____ City / State / Zip: _____ Phone #: _____

(Complete and attach a Form CPF M.A. 101, if necessary, with other officers and finance committee, if any.)

I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY: [Signature] Date: 9/8/21
Candidate's signature

I hereby accept the office of Treasurer of the above-named committee. I affirm that I am not a public employee as defined by M.G.L. c. 55, s. 13. I understand that: 1) I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election; 2) if after my acceptance of this office I become an appointed public employee, I must resign this position and notify OCPF of my resignation; and 3) a candidate may not serve as treasurer of the political committee organized on his/her behalf.

SIGNED UNDER THE PENALTIES OF PERJURY: [Signature] Date: 9/8/21
Treasurer's signature

I hereby accept the office of Chairman of the above-named committee.
 SIGNED UNDER THE PENALTIES OF PERJURY: _____ Date: _____
 Chairman's signature



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

Fill in Reporting Period dates: Beginning Date: 8/2/21 Ending Date: 10/26/21

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

Mark Bisson
 Candidate Full Name (if applicable)
 School Committee / Franklin Ma
 Office Sought and District
 39 Miller St. Franklin Ma 02038
 Residential Address
 E-mail: mbisson4sc@gmail.com
 Phone # (optional):

NONE
 Committee Name
 Name of Committee Treasurer
 Committee Mailing Address
 E-mail:
 Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, line 14)	453.68
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	

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) Date: _____

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

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

Candidate without Committee
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.
 Signed under the penalties of perjury: _____ (Candidate's signature) Date: 10/24/2021



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

TOWN OF FRANKLIN
TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: 2021 OCT 25 ^{8:09} Beginning Date: 8.26.2021 Ending Date: 10.19.21

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

David C. Callaghan
Candidate Full Name (if applicable)
School Committee
Office Sought and District
30 Plain St Franklin MA 02038
Residential Address
E-mail: DC.Callaghan@gmail.com
Phone # (optional): 508.873.7472

Committee Name

Name of Committee Treasurer

Committee Mailing Address
E-mail: _____
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>963.29</u>
Line 3: Subtotal (line 1 plus line 2)	<u>963.29</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>963.29</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>Citizen's Bank</u>

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

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

Candidate with Committee and no activity independent of the committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____ (Candidate's signature) Date: _____

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9.15.21	David Callaghan 30 Plain St Franklin MA 02038	349.86	Public Servant Federal Government
9.26.21	David Callaghan 30 Plain St Franklin MA 02038	29.95	Public Servant Federal Government
9.30.21	David Callaghan 30 Plain St Franklin MA 02038	34.32	Public Servant Federal Government
10.1.21	David Callaghan 30 Plain St Franklin MA 02038	388.74	Public Servant Federal Government
10.12.21	David Callaghan 30 Plain St Franklin MA 02038	29.95	Public Servant Federal Government
10.19.21	David Callaghan 30 Plain St Franklin MA 02038	80.22	Public Servant Federal Government
10.19.21	David Callaghan 30 Plain St Franklin MA 02038	50.25	Public Servant Federal Government
Line 9: Total Receipts over \$50 (or listed above)		963.29	
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		963.29	

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.



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

Fill in Reporting Period dates: Beginning Date: August 20, 2021 Ending Date: December 31, 2021

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

Al Charles
Candidate Full Name (if applicable)
Franklin School Committee
Office Sought and District
10 Hawthorne Dr, Franklin, MA 02038
Residential Address
E-mail: AlCharlesFSC@gmail.com
Phone # (optional): _____

Charles Committee
Committee Name
Thea Charles
Name of Committee Treasurer
10 Hawthorne Dr, Franklin, MA 02038
Committee Mailing Address
E-mail: AlCharlesFSC@gmail.com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	\$0.00
Line 2: Total receipts this period (page 3, line 11)	\$685.00
Line 3: Subtotal (line 1 plus line 2)	\$685.00
Line 4: Total expenditures this period (page 5, line 14)	\$684.99
Line 5: Ending Balance (line 3 minus line 4)	\$0.01
Line 6: Total in-kind contributions this period (page 6)	\$0.00
Line 7: Total (all) outstanding liabilities (page 7)	\$0.00
Line 8: Name of bank(s) used:	<u>Dean Bank</u>

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

Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 01.06.2022

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

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

Candidate without Committee
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 01.06.2022

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)
09.26.2021	Brian Bodiya 133 Oak St Franklin, MA 02038	\$100	
09.24.2021	Christopher Brady 36 KIMBERLEE AVENUE Franklin, MA 02038	\$25	
09.24.2021	Cindy Brown 157 Grove St. Ste 60 Franklin, MA 02038	\$25	
09.25.2021	Sue Cass 146 Longhill Road Franklin, MA 02038	\$50	
09.15.2021	Al Charles 10 Hawthorne Dr Franklin, MA 02038	\$40	
10.13.2021	Alan Coughlin 16 Hawthorne Dr Franklin, MA 02038	\$25	
09.26.2021	Dan Dirienzo 14 Cotton Tail Lane Franklin, MA 02038	\$25	
09.30.2021	Gretchen Donohue 7 Padden Rd Franklin, MA 02038	\$25	
09.24.2021	Abby Evans 2 Odyssey Ln Franklin, MA 02038	\$10	
09.29.2021	Lauren Harris 16 Anna Road Franklin, MA 02038	\$25	
10.21.2021	Ryan Kelly 420 Clermont Ave Dallas, TX 75233	\$50	
09.25.2021	Beth Laplante 2 Newell Drive Franklin, MA 02038	\$50	
Line 9: Total Receipts over \$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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
09.25.2021	Ashley Papadopoulos 4 Georgia Drive Franklin, MA 02038	\$50	
10.02.2021	Dr. Maureen Sabolinski 55 Jefferson road Franklin, MA 02038	\$100	
09.24.2021	Katharine Seamans 10 Dover Circle Franklin, MA 02038	\$50	
09.29.2021	Michael Sullivan 55 Stimson St West Roxbury, MA 02132	\$10	
09.27.2021	Sujesh Thomas 2 Symmes Rd Franklin, MA 02038	\$25	
Line 9: Total Receipts over \$50 (or listed above)		\$685.00	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$685.00	← 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.

(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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
11.15.2021	Al Charles	10 Hawthorne Dr Franklin, MA 02038	Yard signs purchased from Imprint.com	\$443.46
10.03.2021	Amazon	410 Terry Ave N Seattle, WA 98109	Envelope for thank you cards.	\$12.74
11.02.2021	Elizabeth's Bagels	456 West Central St Franklin, MA 02038	Breakfast for sign holders	\$28.20
09.28.2021	GoDaddy	14455 N Hayden Rd Scottsdale, AZ 85260	Website domain name	\$3.17
11.04.21	GoDaddy	14455 N Hayden Rd Scottsdale, AZ 85260	Website domain name renewal	\$38.34
09.24 - 12.31.2021	Raise the Money, Inc.	P.O Box 26466 Little Rock, AR 72221	Donation transaction fees	\$35.57
10.07.2021	USPS	43 Main St Franklin, MA 02038	Postage stamps	\$23.20
10.12.2021	USPS	43 Main St Franklin, MA 02038	Postage stamps	\$11.60
09.30.2021	Vistaprint	170 Data Drive Waltham, MA 02451	Thank you cards	\$88.71
Line 12: Total Expenditures over \$50 (or listed above)				\$684.99
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$684.99

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.



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
Massachusetts

File with: City or Town Clerk or Election Commission

Reporting Period dates: Beginning Date: August 20, 2021 Ending Date: October 15, 2021

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

Al Charles
Candidate Full Name (if applicable)
Franklin School Committee
Office Sought and District
10 Hawthorne Dr, Franklin, MA 02038
Residential Address
E-mail: <u>AlCharlesFSC@gmail.com</u>
Phone # (optional): _____

Charles Committee
Committee Name
Thea Charles
Name of Committee Treasurer
10 Hawthorne Dr, Franklin, MA 02038
Committee Mailing Address
E-mail: <u>AlCharlesFSC@gmail.com</u>
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	\$0.00
Line 2: Total receipts this period (page 3, line 11)	\$635.00
Line 3: Subtotal (line 1 plus line 2)	\$635.00
Line 4: Total expenditures this period (page 5, line 14)	\$172.29
Line 5: Ending Balance (line 3 minus line 4)	\$462.71
Line 6: Total in-kind contributions this period (page 6)	\$0.00
Line 7: Total (all) outstanding liabilities (page 7)	\$454.75
Line 8: Name of bank(s) used: <u>Dean Bank</u>	

Signature of Committee Treasurer:
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
 Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 10.20.2021

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

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

Candidate without Committee
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.
 Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 10.20.21

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)
09.26.2021	Brian Bodiya 133 Oak St Franklin, MA 02038	\$100	
09.24.2021	Christopher Brady 36 KIMBERLEE AVENUE Franklin, MA 02038	\$25	
09.24.2021	Cindy Brown 157 Grove St. Ste 60 Franklin, MA 02038	\$25	
09.25.2021	Sue Cass 146 Longhill Road Franklin, MA 02038	\$50	
09.15.2021	Al Charles 10 Hawthorne Dr Franklin, MA 02038	\$40	
10.13.2021	Alan Coughlin 16 Hawthorne Dr Franklin, MA 02038	\$25	
09.26.2021	Dan Dirienzo 14 Cotton Tail Lane Franklin, MA 02038	\$25	
09.30.2021	Gretchen Donohue 7 Padden Rd Franklin, MA 02038	\$25	
09.24.2021	Abby Evans 2 Odyssey Ln Franklin, MA 02038	\$10	
09.29.2021	Lauren Harris 16 Anna Road Franklin, MA 02038	\$25	
09.25.2021	Beth Laplante 2 Newell Drive Franklin, MA 02038	\$50	
09.25.2021	Ashley Papadopoulos 4 Georgia Drive Franklin, MA 02038	\$50	

Line 9: Total Receipts over \$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.

(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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10.03.2021	Amazon	410 Terry Ave N Seattle, WA 98109	Envelope for thank you cards.	\$12.74
09.28.2021	GoDaddy	14455 N Hayden Rd Scottsdale, AZ 85260	Website domain name	\$3.17
09.24 - 10.13.2021	Raise the Money, Inc.	P.O Box 26466 Little Rock, AR 72221	Donation transaction fees	\$32.87
10.07.2021	USPS	43 Main St Franklin, MA 02038	Postage stamps	\$23.20
10.12.2021	USPS	43 Main St Franklin, MA 02038	Postage stamps	\$11.60
09.30.2021	Vistaprint	170 Data Drive Waltham, MA 02451	Thank you cards	\$88.71
Line 12: Total Expenditures over \$50 (or listed above)				\$172.29
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$172.29

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.



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 8-28-21 Ending Date: 10-15-21

Type of Report: (Check one)

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

John McCormack
Candidate Full Name (if applicable)

School Committee
Office Sought and District

300 Country Way
Residential Address

E-mail: McCormack83@grail.com

Phone # (optional): _____

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, line 14)	<u>\$1,288.18</u>
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury: _____ (Treasurer's signature) Date: _____

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

Candidate with Committee and no activity independent of the committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____ (Candidate's signature) Date: 10-25-21



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

TOWN OF FRANKLIN
TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/26/2021 Ending Date: 12/2/2021

Type of Report: (Check one)

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

David McNeill
Candidate Full Name (if applicable)

School Committee, Franklin
Office Sought and District

85 Cross Street; Franklin, MA 02038
Residential Address

E-mail: dave.mcneill777@gmail.com

Phone # (optional): _____

Committee to Elect Dave McNeill
Committee Name

Kenneth Knapp
Name of Committee Treasurer

73 Alpine Place; Franklin, MA 02038
Committee Mailing Address

E-mail: elect.davemcneill@gmail.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$485.28
Line 2: Total receipts this period (page 3, line 11)	\$185.00
Line 3: Subtotal (line 1 plus line 2)	\$670.28
Line 4: Total expenditures this period (page 5, line 14)	\$1.98
Line 5: Ending Balance (line 3 minus line 4)	\$668.30
Line 6: Total in-kind contributions this period (page 6)	\$0
Line 7: Total (all) outstanding liabilities (page 7)	\$0
Line 8: Name of bank(s) used: <u>Rockland Trust</u>	

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 11/30/21

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: David J McNeill (Candidate's signature) Date: 11/30/21

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)
11/1/2021	Committee Carlos Gonzalez State Representative 44 Dover Street; Springfield, MA 01107	\$100	
Line 9: Total Receipts over \$50 (or listed above)		\$100	
Line 10: Total Receipts \$50 and under* (not listed above)		\$85	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$185	← 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.



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

Fill in Reporting Period dates: **TOWN OF FRANKLIN TOWN CLERK**
Beginning Date: 1/1/2021 Ending Date: 10/25/2021
2021 OCT 25 AM 11:22

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

David McNeill
Candidate Full Name (if applicable)
School Committee, Franklin
Office Sought and District
85 Cross Street; Franklin, MA 02038
Residential Address
E-mail: dave.mcneill777@gmail.com
Phone # (optional): _____

Committee to Elect Dave McNeill
Committee Name
Kenneth Knapp
Name of Committee Treasurer
73 Alpine Place; Franklin, MA 02038
Committee Mailing Address
E-mail: elect.dave.mcneill@gmail.com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$0
Line 2: Total receipts this period (page 3, line 11)	<u>\$1,747.5</u> \$1,697.50
Line 3: Subtotal (line 1 plus line 2)	<u>\$1,747.5</u> \$1,697.50
Line 4: Total expenditures this period (page 5, line 14)	\$1,262.22
Line 5: Ending Balance (line 3 minus line 4)	<u>\$485.28</u> \$435.28
Line 6: Total in-kind contributions this period (page 6)	\$0.00
Line 7: Total (all) outstanding liabilities (page 7)	\$0.00
Line 8: Name of bank(s) used:	Rockland Trust

Affidavit of Committee Treasurer:
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 10/22/21

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

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

Candidate without Committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: David J McNeill (Candidate's signature) Date: 10/23/21

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)
9/17/2021	James Byrne 319 Lincoln Street Apartment 248 Hingham, MA 02043	\$50	
10/17/2021	James Byrne 319 Lincoln Street Apartment 248 Hingham, MA 02043	\$50	
9/29/2021	Colin & Sue Cass 146 Longhill Rd Franklin, MA 02038	\$50	
10/14/2021	Monique Doyle 3 Greensfield Rd Franklin, MA 02038	\$100	
9/29/2021	Rick & Patricia Finlayson 490 Nichols St Norwood, MA 02062	\$50	
9/3/2021	Kenneth Knapp 123 DEAN AVENUE APT 3010 Franklin, MA 02038	\$100	
9/29/2021	Barbara McNeill 19 Havana St Roslindale, MA 02131	\$50	
9/29/2021	Joan McNeill 19 Havana St Roslindale, MA 02131	\$100	
9/29/2021	Linda McNeill 73 Alpine Place Franklin, MA 02038	\$500	Accountant Christian and Missionary Alliance
9/20/2021	Raymond Milici 75 Grey Wolf Drive Franklin, MA 02038	\$50	
9/9/2021	Brendan Roche 533 Elm St Mansfield, MA 02048	\$100	
9/27/2021	Brendan Roche 533 Elm St Mansfield, MA 02048	\$50	
Line 9: Total Receipts over \$50 (or listed above)		\$1,300.00 \$1,350.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$397.50	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$1,697.50 \$1,747.50	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/21/2021	Roberta Trahan 1 Green St Franklin, MA 02038	\$50	
9/29/2021	Jeffrey Roy 6 Lydia Ln Franklin, MA 02038	\$50	
Line 9: Total Receipts over \$50 (or listed above)		\$1,300.00 \$1,350.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$397.50	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$1,697.50 \$1,747.50	← 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/27/2021	NextDayFlyers	8000 Haskell Ave. Van Nys, CA 91406	Palm Cards	\$102.21
10/7/2021	Next DayFlyers	8000 Haskell Ave. Van Nys, CA 91406	Mailer	\$1,042.94
10/7/2021	Signs on the Cheap	11525A Stonehollow Dr., 100 Austin, TX, 78758	Yard Signs	\$92.14
Line 12: Total Expenditures over \$50 (or listed above)				\$1,237.29
Line 13: Total Expenditures \$50 and under* (not listed above)				\$24.93
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$1,262.22

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



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

Fill in Reporting Period dates: Beginning Date: 8/2/2021 Ending Date: 10/15/2021

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

Denise Spencer
Candidate Full Name (if applicable)
School Committee
Office Sought and District
59 Milliken Ave Franklin MA
Residential Address
E-mail: dspencer2447@gmail.com
Phone # (optional): _____

TOWN OF FRANKLIN
2021 OCT 23 A 10:34
RECEIVED
Committee Name
Name of Committee Treasurer
Committee Mailing Address
E-mail: _____
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>710.18</u>
Line 5: Ending Balance (line 3 minus line 4)	_____
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	_____

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

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

Candidate with Committee and no activity independent of the committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: D Spencer (Candidate's signature) Date: 10/23/2021



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

Fill in Reporting Period dates: Beginning Date: 10/28/19 Ending Date: 10/25/21

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

Elise A. Stokes
Candidate Full Name (if applicable)
School Committee
Office Sought and District
136 Pleasant St Franklin
Residential Address
E-mail: eliseastokes@gmail.com
Phone # (optional):

Committee Name
Name of Committee Treasurer
Committee Mailing Address:
E-mail:
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, line 14)	489.06
Line 5: Ending Balance (line 3 minus line 4)	-489.06
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: <u>Discover</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) Date: _____

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

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

Candidate without Committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: Elise A Stokes (Candidate's signature) Date: 10/25/21



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

Fill in Reporting Period dates: Beginning Date: 10/26/2021 Ending Date: 12/2/2021

Type of Report: (Check one)

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

Dashe Videira
Candidate Full Name (if applicable)

Franklin School Committee
Office Sought and District

35 Marvin Avenue Franklin, MA 02038
Residential Address

E-mail: videira99@gmail.com

Phone # (optional): _____

Committee to Elect Dashe Videira
Committee Name

Michael Videira
Name of Committee Treasurer

35 Marvin Avenue Franklin, MA 02038
Committee Mailing Address

E-mail: dashev@dasheforfreedom.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

210.94

Line 2: Total receipts this period (page 3, line 11)

306.72

Line 3: Subtotal (line 1 plus line 2)

517.66

Line 4: Total expenditures this period (page 5, line 14)

442.53

Line 5: Ending Balance (line 3 minus line 4)

75.13

Line 6: Total in-kind contributions this period (page 6)

Line 7: Total (all) outstanding liabilities (page 7)

Line 8: Name of bank(s) used: Rochland Trust

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury: [Signature] (Treasurer's signature)

Date: 12/2/2021

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: [Signature] (Candidate's signature)

Date: 12/2/2021

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)
11/1/2021	Alan R. Earls 23 Marvin Avenue Franklin, MA 02038	100	Freelance writer Self-employed
10/28/2021	Dashe Videira (Candidate) 35 Marvin Ave Franklin, MA 02038	122.72	Candidate loan (used personal credit card at Rock N Coal for pizza for campaign event)
Line 9: Total Receipts over \$50 (or listed above)		222.72	
Line 10: Total Receipts \$50 and under* (not listed above)		84	
Line 11: TOTAL RECEIPTS IN THE PERIOD		306.72	← 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.

(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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
12/1/2021	Dashe Videira (Candidate)	35 Marvin Ave Franklin, MA 02038	Candidate Loan Payment for Rock N Coal Pizza	122.72
12/1/2021	Rock N Coal Pizza	799 South Main Street Bellingham, MA 02019	Pizza for campaign event (Candidate Loan)	122.72
11/8/2021	Taylor Rental	30 Cushing Drive Wrentham, MA 02093	Chairs and stage for campaign event	197.09
Line 12: Total Expenditures over \$50 (or listed above)				442.53
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Line 14: TOTAL EXPENDITURES IN THE PERIOD				442.53

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.



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

TOWN OF FRANKLIN
TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 8/18/2021 Ending Date: 10/25/2021

Type of Report: (Check one)

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

Dashe Videira
Candidate Full Name (if applicable)

Franklin School Committee
Office Sought and District

35 Marvin Avenue Franklin, MA 02038
Residential Address

E-mail: videira99@gmail.com

Phone # (optional): _____

Committee to Elect Dashe Videira
Committee Name

Michael Videira
Name of Committee Treasurer

35 Marvin Avenue Franklin, MA 02038
Committee Mailing Address

E-mail: dashev@dasheforfreedom.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	2,516.46
Line 3: Subtotal (line 1 plus line 2)	2,516.46
Line 4: Total expenditures this period (page 5, line 14)	2,305.52
Line 5: Ending Balance (line 3 minus line 4)	210.94
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	197.09
Line 8: Name of bank(s) used:	Rockland Trust

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

Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 10/25/2021

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

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

Candidate without Committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 10/25/2021

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)
9/17/2021	Brian Luccini 5 Paulene Dr. Franklin, MA 02038	200	Client Representative Tom Irwin Inc.
9/11/2021	Dashe Videira (Candidate) 35 Marvin Ave Franklin, MA 02038	524.88	Candidate loan (used personal credit card for lawn sign purchase)
10/15/2021	Dashe Videira (Candidate) 35 Marvin Ave Franklin, MA 02038	231.58	Candidate loan (used personal credit card at Whole Foods for food for campaign event)
10/23/2021	Dashe Videira (Candidate) 35 Marvin Ave Franklin, MA 02038	300	Candidate loan (used personal credit card for hall rental for upcoming campaign event)
10/10/2021	David Digiovanni 9 Paulene Dr. Franklin, MA 02038	100	
10/22/2021	Joseph G. Evans 5 Tam O Shanter Rd Franklin, MA 02038	200	Commercial Real Estate Agent American Commercial Real Estate, LLC
9/21/2021	Michael J. Razzano 71 Oak Street Franklin, MA 02038	100	
Line 9: Total Receipts over \$50 (or listed above)		1,656.46	
Line 10: Total Receipts \$50 and under* (not listed above)		860	
Line 11: TOTAL RECEIPTS IN THE PERIOD		2,516.46	← 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/23/2021	Christalight Auditorium and Event Hall	799 S Main St SUITE 18, Bellingham, MA 02019	Hall Rental for Fundraiser/Event (Candidate Loan)	300
10/25/2021	Dashe Videira (Candidate)	35 Marvin Ave Franklin, MA 02038	Candidate Loan Payment for Christalight Auditorium, NHS Printing, and Whole Foods	1,056.46
9/11/2021	NHS Printing	333 East Central Street Franklin, MA 02038	50 Lawn Signs (Candidate Loan)	524.88
10/24/2021	Sticks and Stones	514 High Plain Street Walpole, MA 02081	15 Pizzas for Fundraiser/Event	192.6
10/15/2021	Whole Foods	255 Hartford Ave Bellingham, MA 02019	Food for Fundraiser/Event (Candidate Loan)	231.58
Line 12: Total Expenditures over \$50 (or listed above)				2,305.52
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Line 14: TOTAL EXPENDITURES IN THE PERIOD				2,305.52

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.



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

Fill in Reporting Period dates: Beginning Date: 8-31-2021 Ending Date: 11-2-2021

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

Meghan Lee Whitmore
Candidate Full Name (if applicable)
Franklin School Committee
Office Sought and District
9 Downingwood Drive
Residential Address
E-mail: Meghanlee.whitmore@gmail.com
Phone # (optional): 508 561 0515

Committee Name
Name of Committee Treasurer
Committee Mailing Address
E-mail:
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	- 0 -
Line 2: Total receipts this period (page 3, line 11)	646.27
Line 3: Subtotal (line 1 plus line 2)	646.27
Line 4: Total expenditures this period (page 5, line 14)	646.27
Line 5: Ending Balance (line 3 minus line 4)	- 0 -
Line 6: Total in-kind contributions this period (page 6)	- 0 -
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury: _____ (Treasurer's signature) Date: _____

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

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

Candidate without Committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Meghan Lee Whitmore (Candidate's signature) Date: 11-1-2021



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

TOWN OF FRANKLIN
TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 11/01/2021 Ending Date: 12/31/2021

Type of Report: (Check one)

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

Nancy Danello
Candidate Full Name (if applicable)

Franklin Town Clerk
Office Sought and District

200 Woodview Way // U2226 // Franklin Mass 02038
Residential Address

E-mail: gadnd95@gmail.com

Phone # (optional): _____

Committee to Elect Nancy Danello
Committee Name

Bianca A Danello
Name of Committee Treasurer

200 Woodview Way // u2226 // Franklin Mass 02038
Committee Mailing Address

E-mail: gadnd95@gmail.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	920.07
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	920.07
Line 4: Total expenditures this period (page 5, line 14)	920.07
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Rockland Trust // Franklin Mass 02038

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: Nancy Danello (Treasurer's signature) Date: Dec 14, 2021

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

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

Candidate without Committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Nancy Danello (Candidate's signature) Date: Dec 14, 2021

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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Nov 1, 2021	Stop & Shop	Franklin Ma 02038	Food for Sign Holders	44.00
Nov 1, 2021	Dunkin	Bellingham Ma	Coffee and Food for Sign Holders	27.99
Nov 5, 2021	Panera	Franklin Ma 02038	Food for Sign Holders	17.99
Nov 9, 2021	Digital Analytics	Winchester Ma 01890	GEO Target Marketing	600.00
Nov 29, 2021	Google		Website	12.75
Dec 14, 2021	Franklin Food Pantry	Franklin Mass	Donation // Close out of Rockland Trust acct	217.34
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				920.07

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.



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Sept 20 Ending Date: OCT 23, 2021

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

Nancy Danello
Candidate Full Name (if applicable)
FRANKLIN TOWN CLERK
Office Sought and District FRANKLIN
200 Woodview Way
Residential Address MA
E-mail: GADND95@gmail.com
Phone # (optional): 774-248-4991

Committee to Elect Nancy Danello
Committee Name
Bianca A. Danello
Name of Committee Treasurer
200 Woodview Way
Committee Mailing Address FRANKLIN MA
E-mail: GADND95@gmail.com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 11)

\$ 2550.00

Line 3: Subtotal (line 1 plus line 2)

\$ 2550.00

Line 4: Total expenditures this period (page 5, line 14)

\$ 1617.28

Line 5: Ending Balance (line 3 minus line 4)

\$ 932.82

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used:

ROCKLAND TRUST

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:

Bianca A. Danello (Treasurer's signature)

Date: 10/23/21

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury:

Nancy Danello (Candidate's signature)

Date: 10/23/21

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)
9/20	George & Nancy Danello 200 Woodview Way	\$700	Town clerk - Nancy Executive - George
9/21	Helena Dolan 252 Purchase St Milford MA	\$500	Town of Milford Treasurer's office
9/29	Joe Vendetti, 411 West Central Franklin	\$250	Vendetti Motors OWNER
9/29	Gina Vendetti, 122 Brandywine Franklin MA	\$100	
9/28	Bianca Danello 200 Woodview Way Franklin MA	\$100	
9/22	Pete Brunell, 160 Brook St Franklin MA	\$250	retired
9/27	Gery Welshoff 7 Oakridge Dr Franklin	\$100	
10/15/1	Jennifer Ellis 51 Victor Lane Franklin MA	\$100	
10/14	Rose Turco Wink St Franklin MA	\$50	
10/15	Julie Lombardo 45 Court St Franklin MA	\$100	
10/22	NIXON Peabody LLP 1300 Clinton St PAC Rochester NY 14604	\$300	NIXON Peabody LLP
Line 9: Total Receipts over \$50 (or listed above)		2550.01	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		2550.00	← 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.

(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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/21	AllegRA	FRANKLIN	SIGNS	\$637.50
9/27	GIANNA Buchino	MILFORD MA	Magnets	\$104.84
9/30	AllegRA	FRANKLIN	SIGNS	\$159.38
10/19	AllegRA	FRANKLIN	Brochures	\$254.66
9/21	Home Depot ##	Bellingham	wood for SIGNS	27.24
9/22	Home Depot	Bellingham	wood for SIGNS	79.48
9/25	BJs	FRANKLIN	Supplies for Harvest Fest 10/2/21	129.30
9/27	Google		DOMAIN NAME	12.00
10/4 10/5	DADDARIO S	FRANKLIN	Uelcro Uelcro	11.15 11.15
10/9	DUNKIN Doughnuts	FRANKLIN	Coffee Food - sign holders	27.99
9/22	Harvest Fest FRANKLIN	FRANKLIN	Booth for Harvest Fest	125.00
10/18	PANERA	FRANKLIN	Coffee Food - sign holders	\$25.59
Line 12: Total Expenditures over \$50 (or listed above)				1605.28
Line 13: Total Expenditures \$50 and under* (not listed above)				—
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1605.28

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.



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

TOWN OF
2011-10-31 AM 11:17

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10-26-21 Ending Date: 11-2-21

Type of Report: (Check one)

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

LYNNE R. SANTORSOLA
Candidate Full Name (if applicable)

TOWN CLERK
Office Sought and District

4 INDIAN BROOK LN
Residential Address

E-mail: lynesantorsola@comcast.net

Phone # (optional): _____

~~Committee Name~~

~~Name of Committee Treasurer~~

~~Committee Mailing Address~~

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>- 818.68</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>- 818.68</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>- 818.68</u>
Line 6: Total in-kind contributions this period (page 6)	<u>37.00</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>NONE</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) Date: _____

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: Lynne Santorsola (Candidate's signature) Date: 11-2-21



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

TOWN OF FRANKLIN
TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period, dates: SEP 25 Beginning Date: 9-3-21 Ending Date: 10-25-21

Type of Report: (Check one)

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

LYNNE R. SANTORSOLA
Candidate Full Name (if applicable)

TOWN CLERK
Office Sought and District

4 INDIAN BROOK LN
Residential Address

E-mail: lynesantorsola@comcast.net

Phone # (optional): _____

~~_____
Committee Name~~

~~_____
Name of Committee Treasurer~~

~~_____
Committee Mailing Address~~

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>818.68</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>-818.68</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>NONE</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) Date: _____

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

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

Signed under the penalties of perjury: Lynne R. Santorsola (Candidate's signature) Date: 10-25-21



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

Fill in Reporting Period dates:

Beginning Date:

8/26/21

Ending Date:

10-25-21

Type of Report: (Check one)

8th day preceding preliminary

8th day preceding election

30 day after election

year-end report

dissolution

Andrew Bissanti
Candidate Full Name (if applicable)

Town Council
Office Sought and District

148 Brook Street
Residential Address

E-mail: familybissanti@gmail.com

Phone # (optional): 774-244-6549

Committee to Elect
Committee Name

Christina Bissanti P.O. Box 730
Name of Committee Treasurer

familybissanti@gmail.com
Committee Mailing Address

E-mail: P.O. Box 332, Franklin, MA

Phone # (optional): 774-244-6549

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 11)

1655.00

Line 3: Subtotal (line 1 plus line 2)

1655.00

Line 4: Total expenditures this period (page 5, line 14)

1242.00

Line 5: Ending Balance (line 3 minus line 4)

413.00

Line 6: Total in-kind contributions this period (page 6)

1655.00

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used:

DEAN 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:

[Signature]

(Treasurer's signature)

Date: 10/25/2021

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

Candidate with Committee and no activity independent of the committee

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

Candidate without Committee OR Candidate with independent activity filing separate report

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

Signed under the penalties of perjury:

[Signature]

(Candidate's signature)

Date: 10/25/2021



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

Fill in Reporting Period dates: Beginning Date: 8-2 Ending Date: 10-3-21

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

Jane Callaway-Tripp
 Candidate Full Name (if applicable)
Town Council
 Office Sought and District
607 Maple St. Franklin Ma.
 Residential Address
 E-mail: JaneCallawayTripp@gmail.com
 Phone # (optional): 774-5714017

TOWN OF FRANKLIN
 COMMITTEE CLERK
 RECEIVED
 2021 OCT 25 1:43
 Committee Name
 Name of Committee Treasurer
 Committee Mailing Address
 E-mail:
 Phone # (optional):

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, line 14)	<u>963.43</u>
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	

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

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

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

Candidate without Committee
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.
 Signed under the penalties of perjury: Jane Callaway Tripp (Candidate's signature) Date: 10/25/2021

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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
8/5/2021	Walgreens	160 E Central St. Franklin ma 02038	Business cards	\$42.45
8/11/2021	Staples	284 Hartford Ave Bellingham ma 02019	Printer ink office supplies	\$163.35
8/20/21	Signsonthecheap (online)	Signsonthecheap.com	Yard signs	\$520.99
9/22/2021	Staples	284 Hartford Ave Bellingham Ma 02019	office supplies Ink	\$142.10
10/3/2021	Staples	284 Hartford Ave Bellingham Ma 02019	Printer Ink	\$94.54
Line 12: Total Expenditures over \$50 (or listed above)				963.43
Line 13: Total Expenditures \$50 and under* (not listed above)				/
Line 14: TOTAL EXPENDITURES IN THE PERIOD				963.43

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.



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

Fill in Reporting Period dates: Beginning Date: 8-27-2021 Ending Date: 10/25/21

Type of Report: (Check one)

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

BRIAN M CHANDLER
Candidate Full Name (if applicable)

Town Council
Office Sought and District

58 Highwood Dr
Residential Address

E-mail: WESTSECTOR@gmail.com

Phone # (optional): 508-528-2312

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, line 14)	<u>377.88</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury: _____ (Treasurer's signature) Date: _____

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

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

Candidate without Committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Bca (Candidate's signature) Date: 10-25-2021



Commonwealth of Massachusetts

Form CPF D 102 : 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#

Please print or type all information, except signatures.

Fill in dates: Month Date Year Month Date Year

Reporting Period Beginning 10 16 21 Ending 11 30 21

Type of report: (Check one)

Initial Report Year-end Report Dissolution Report Other 30 Day After Election

Theodore Cormier-Leger
Full Name of Candidate

Town Council
Office Sought/District

3 Ashbury Dr. Franklin, MA
Residential Address

Tel. No. (optional)

CTE Ted Cormier-Leger
Committee Name

Arthe Cormier-Leger
Name of Committee Treasurer

3 Ashbury Dr
Committee Mailing Address

Franklin, MA 02038
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 363.22

Line 2: Total receipts this period (page 2, line 11) \$ 605.07

Line 3: Subtotal (line 1 plus line 2) \$ 968.29

Line 4: Total expenditures this period (page 3, line 14) \$ 699.24

Line 5: Ending balance (line 3 minus line 4) \$ 269.05

Line 6: Total in-kind contributions this period (page 3) \$ 0

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

Line 8: Name of bank(s) used BRISTOL CTY SAV BANK, Franklin

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury:

[Signature] 12/2/21
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 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] 12/2/21
Candidate signature (in ink) Date

SCHEDULE A: RECEIPTS

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

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/27	Barbara Scardino *	100 -	
10/28	Lynda Dragsbaek *	100 -	
11/1	Jeff Roy *	100 -	
Line 9:	Total receipts in excess of \$50	300 -	
Line 10:	Total receipts \$50 and under	305 07	
Line 11:	TOTAL RECEIPTS IN THE PERIOD	605 07	Enter on page 1, line 2.

* Received via Act Blue and subject to fees.
SAVINGS ACCOUNT INFORMATION

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

If yes, complete the following:

Name(s) of Bank(s) and/or CDs	Amount in account/CD etc.
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

SAVINGS ACCOUNT/CD TOTAL: \$ Ø

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

SCHEDULE B: EXPENDITURES

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

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

Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
11/1	Chris Macellan	Olde Camage Ln Franklin, MA	Catering, Campaign Event	200	-
11/12	Ted Cormier-Leger	3 Ashbury Dr. Franklin, MA	Reimbursement MISC Exp.	91	37
11/16	Allegra	317 Union St Franklin, MA	Printing, Cards	133	55
11/18	Susan Smith	Denise Dr. Franklin	Catering, House Party	100	-
11/30	Ted Cormier-Leger	3 Ashbury Dr. Franklin	Postage + Web Ads	164	02
Line 12: Expenditures over \$50				688	94
Line 13: Expenditures \$50 and under				10	30
Line 14: TOTAL EXPENDITURES				699	24

Enter on page 1, line 4

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

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

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

Enter on page 1, line 6

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

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

SCHEDULE D: LIABILITIES

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

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

SCHEDULE E: DISCLOSURE OF ASSETS STATEMENT

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

Part A:

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

Part B:

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

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

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

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

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

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

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





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

Fill in Reporting Period dates: Beginning Date: 08/01/21 Ending Date: 10/15/21

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

Theodore D. Cormier-Leger
 Candidate Full Name (if applicable)
TOWN COUNCIL, Franklin
 Office Sought and District
3 Ashbury Dr. Franklin, MA 02038
 Residential Address
 E-mail: TED.CORMIERLEGER@aol.com
 Phone # (optional): 617.686.1265

LTE TED Cormier-Leger
 Committee Name
Arthur Cormier-Leger
 Name of Committee Treasurer
3 Ashbury Dr. Franklin, MA 02038
 Committee Mailing Address
 E-mail: R+leger Jr@hotmail.com
 Phone # (optional): 617.686.1407

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

\$ 73.67

Line 2: Total receipts this period (page 3, line 11)

\$ 1272.38

Line 3: Subtotal (line 1 plus line 2)

\$ 1346.05

Line 4: Total expenditures this period (page 5, line 14)

\$ 982.83

Line 5: Ending Balance (line 3 minus line 4)

\$ 363.22

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used:

BRISTOL COUNTY SAVINGS BANK

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury:

(Treasurer's signature)

Date: 10/22/21

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

Candidate with Committee and no activity independent of the committee

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

Candidate without Committee OR Candidate with independent activity filing separate report

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

Signed under the penalties of perjury:

(Candidate's signature)

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)
8/9/21 *	RICK EVANS 1330 1st Ave NY, NY 10021	\$200-	Chief Experience officer NY Presbyterian Hospital
8/11/21 *	Sheila + Rich Alessi 10 Prospect Hill Dr Tewksbury	\$250-	Teacher + GM, Car Dealership Tewksbury, MA
8/24/21 *	Paula + Herb Gross 411 Eagles Nest WY Franklin	\$100-	Retired
8/27/21	Ray Milci 75 Grey Wolf Dr Franklin	\$50-	Retired
8/27/21	Felicia Collazzo Somerville, MA	\$100-	Retired
8/27/21	Genevieve + Armand Cormier Plymouth, MA	\$100-	Retired
10/13/21	Reidar Davres Sr. Franklin, MA	\$150-	COO, Albrecht Auto Group Woburn, MA
9/22/21 *	Roberta Trahan Franklin, MA	\$50-	Retired
9/1/21	Phil Gordin Marianne Lyons Hopkinton, MA	\$100-	
*	Paid via online, Act Blue (some donations were subject to fees)		
Line 9: Total Receipts over \$50 (or listed above)		\$1100-	
Line 10: Total Receipts \$50 and under* (not listed above)		\$172.38	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$1272.38	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.



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2012 12-31 AND 12

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: _____ Ending Date: _____

Type of Report: (Check one)

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

Alan R. Earls
Candidate Full Name (if applicable)

Town Council
Office Sought and District

23 Marvin Ave, Franklin
Residential Address

E-mail: alan.r.earls@gmail.com

Phone # (optional): _____

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	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: _____ (Treasurer's signature) Date: _____

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

Candidate with Committee and no activity independent of the committee

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

Candidate without Committee OR Candidate with independent activity filing separate report

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

Signed under the penalties of perjury: Alan R. Earls (Candidate's signature) Date: 12-30-21

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 \$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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/16/01	Amazo	Milford MA	safety tape	26.70
9/24/01	"	"	packing tape	38.70
Line 12: Total Expenditures over \$50 (or listed above)				63.42
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				63.42

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



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

Fill in Reporting Period dates: Beginning Date: Sept 20 2021 Ending Date: 11-30-2021

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

<u>Alan R. Ewls</u> Candidate Full Name (if applicable)	<u>2021</u> Committee Name
<u>Town Council</u> Office Sought and District	Name of Committee Treasurer
<u>83 Marine Ave</u> Residential Address	Committee Mailing Address
E-mail: <u>alan.f.ewls@gmail.com</u>	E-mail:
Phone # (optional):	Phone # (optional):

SUMMARY BALANCE INFORMATION:

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

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

Candidate with Committee and no activity independent of the committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: Alan R. Ewls (Candidate's signature) Date: 11-30-2021

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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/16/21	AMAZON	Mr Ford MA	safety tape	26.70
9/24/21	"	"	Packing tape	38.72
Line 12: Total Expenditures over \$50 (or listed above)				65.42
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				65.42

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.



TOWN OF FRANKLIN
TOWN CLERK

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

10/25 P 2:32

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Sept 20, 2020 Ending Date: Oct 25, 2021

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

Alan R. Earls
Candidate Full Name (if applicable)
Town Councilor
Office Sought and District
23 MARVIN AVE
Residential Address
E-mail: alan.riearls@gmail.com
Phone # (optional): 508 528 6930

~~Committee Name~~
~~Name of Committee Treasurer~~
~~Committee Mailing Address~~
E-mail:
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$65.42</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</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) Date: _____

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

Candidate with Committee and no activity independent of the committee

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

Candidate without Committee OR Candidate with independent activity filing separate report

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

Signed under the penalties of perjury: Alan R. Earls (Candidate's signature) Date: Oct 25 2021

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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4/16/21	Amerzo	Milford MA	Safety tape	26.70
9/24/21	"	"	Packing tape	38.72
Line 12: Total Expenditures over \$50 (or listed above)				65.42
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$ 65.42

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.



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

Fill in Reporting Period dates: Beginning Date: 10/25/2021 Ending Date: 12/2/2021

Type of Report: (Check one)

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

Cobi F Frongillo
Candidate Full Name (if applicable)

Franklin Town Council
Office Sought and District

140 Maple Street, Franklin, Ma 02038
Residential Address

E-mail: _____

Phone # (optional): _____

Committee to Elect Cobi Frongillo
Committee Name

Richard Frongillo
Name of Committee Treasurer

140 Maple Street, Franklin, Ma 02038
Committee Mailing Address

E-mail: Finance@CobiFrongillo.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$696.93
Line 2: Total receipts this period (page 3, line 11)	\$765.00
Line 3: Subtotal (line 1 plus line 2)	\$1461.93
Line 4: Total expenditures this period (page 5, line 14)	\$256.92
Line 5: Ending Balance (line 3 minus line 4)	\$1,205.01
Line 6: Total in-kind contributions this period (page 6)	\$0.00
Line 7: Total (all) outstanding liabilities (page 7)	\$0.00
Line 8: Name of bank(s) used:	Rockland Trust

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 12/2/2021

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

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

Candidate without Committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 12/2/2021

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)
10/26/2021	John Bedarian 48 Winter Street Franklin, Ma 02038	\$150.00	
10/26/2021	Jane and Kurt Hanson 67 Bridle Path, Franklin, Ma 02038	\$100.00	
10/26/2021	Phillip Jordan 50 Mill Pond Dr, Franklin, Ma 02038	\$250.00	BW Research
10/29/2021	Chris Feeley 5 Taft Rd, Franklin, Ma 02038	\$250.00	Accountant Custom Payroll
Line 9: Total Receipts over \$50 (or listed above)		\$750.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$15.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$765.00	← 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.

(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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
11/1/2021, 11/3/2021	Facebook	1 Hacker Way, Menlo Park, CA 94025	Facebook Ads	\$110.00
10/29/2021, 11/1/2021	USPS	43 Main St, Franklin, MA 02038	Stamps	\$127.60
Line 12: Total Expenditures over \$50 (or listed above)				\$237.60
Line 13: Total Expenditures \$50 and under* (not listed above)				\$19.32
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$256.92

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.



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

TOWN OF FRANKLIN
TOWN CLERK
2021 OCT 25 10 3 21

Fill in Reporting Period dates: Beginning Date: 3/10/2021 Ending Date: 10/25/2021

Type of Report: (Check one)

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

Cobi F Frongillo
Candidate Full Name (if applicable)

Franklin Town Council
Office Sought and District

140 Maple Street, Franklin, Ma 02038
Residential Address

E-mail: Cobi@CobiFrongillo.com

Phone # (optional): _____

Committee to Elect Cobi Frongillo
Committee Name

Richard Frongillo
Name of Committee Treasurer

140 Maple Street, Franklin, Ma 02038
Committee Mailing Address

E-mail: Finance@CobiFrongillo.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$5.95
Line 2: Total receipts this period (page 3, line 11)	\$2,417.00
Line 3: Subtotal (line 1 plus line 2)	\$2,422.95
Line 4: Total expenditures this period (page 5, line 14)	\$1,726.02
Line 5: Ending Balance (line 3 minus line 4)	\$696.93
Line 6: Total in-kind contributions this period (page 6)	\$0.00
Line 7: Total (all) outstanding liabilities (page 7)	\$0.00
Line 8: Name of bank(s) used:	Rockland Trust

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 10/25/2021

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 10/25/2021

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)
10/1/2021	Francis Bositis 10 West Pine St, Milford, MA 01757	\$75.00	
7/29/2021	Christopher Brady 36 Kimberlee Ave., Franklin, MA 02038	\$100.00	
7/30/2021	Sue Cass 146 Longhill Road, Franklin, MA 02038	\$100.00	
10/10/2021	Chris & Brenda Davis 75 Plain Street, Franklin, MA 02038	\$100.00	
10/14/2021	David Doherty 147 Dean Ave, Franklin, MA 02038	\$100.00	
9/18/2021	Lynda and Bjorn Dragsbaek 3 Norumbega Circle, Franklin, Ma 02038	\$100.00	
9/25/2021	Marguerite & Ed Frongillo 3600 Beverly Drive, Columbia, SC 29204	\$100.00	
9/19/2021	Fariborz Hashimi 5 Bald Hill Drive, Franklin, MA 02038	\$100.00	
7/29/2021	Phillip Jordan 50 Mill Pond Dr, Wrentham, MA 02093	\$100.00	
10/21/2021	Sagar Kamarthi 61 A Street, Franklin, MA 02038	\$100.00	
9/30/2021	Michael Katinas 757 W Roxbury Pky, W Roxbury, MA 02132	\$200.00	M&A Consulting RSM US
9/25/2021	Tracey & Rick LaRowe 16 Hunter's Run, Franklin, MA 02038	\$100.00	
7/29/2021	Jeff Roy 6 Lydia Ln, Franklin, MA 02038	\$100.00	
9/10/2021	Suzanne Sayward 37 Wampanoag Dr, Franklin, MA 02038	\$100.00	
Line 9: Total Receipts over \$50 (or listed above)		\$1,475.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$942.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$2,417.00	← 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.

(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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/21/2021	Allegra Marketing Print Mail	317 Union St, Franklin, MA 02038	Stickers and Stamps	\$257.09
9/13/2021	Amazon	410 Terry Ave N, Seattle 98109, WA	Sign Holders	\$52.05
10/22/2021	PayPal	PayPal	Donation Fees	\$71.55
10/3/2021	Staples	284 Hartford Ave, Bellingham, MA 02019	Printing and Envelopes	\$669.31
10/12/2021	USPS	43 Main St, Franklin, MA 02038	Stamps	\$580.00
Line 12: Total Expenditures over \$50 (or listed above)				\$1,630.00
Line 13: Total Expenditures \$50 and under* (not listed above)				\$96.02
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$1,726.02

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.



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

Fill in Reporting Period dates: Beginning Date: 9/14/21 Ending Date: 10/26/21

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

<u>Glenn F. Jones</u> Candidate Full Name (if applicable)	<u>CTE Glenn Jones</u> Committee Name
<u>TOWN Council</u> Office Sought and District	<u>Barbara J. Cohen</u> Name of Committee Treasurer
<u>172 School St, Franklin</u> Residential Address	<u>172 School St, Franklin</u> Committee Mailing Address
E-mail: <u>glennfjones172@gmail.com</u>	E-mail: <u>glennfjones172@gmail.com</u>
Phone # (optional):	Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$0.00
Line 2: Total receipts this period (page 3, line 11)	\$500.00
Line 3: Subtotal (line 1 plus line 2)	\$500.00
Line 4: Total expenditures this period (page 5, line 14)	\$422.88
Line 5: Ending Balance (line 3 minus line 4)	\$77.12
Line 6: Total in-kind contributions this period (page 6)	0.00
Line 7: Total (all) outstanding liabilities (page 7)	0.00
Line 8: Name of bank(s) used:	<u>Dean Bank, Franklin</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: Barbara J. Cohen (Treasurer's signature) Date: 10/26/21

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

Candidate with Committee and no activity independent of the committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 10/26/21

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)
9/14/21	LOCAL 103 PAC, 256 FREEDOM ST, BOSTON 02125	\$500.00	Local 103 FBew Political action comm
Line 9: Total Receipts over \$50 (or listed above)		\$500.00	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$500.00	<input type="checkbox"/> Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/21/21	The Golden manet Press	86 ROBERTSON ST QUINCY, MA, 02169	Campaign (50) STARS	\$422.88
Line 12: Expenditures over \$50 (or listed above)				\$422.88
Line 13: Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$422.88

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.



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

Fill in Reporting Period dates: Beginning Date: _____ Ending Date: Nov 22, 2021

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

Deborah Pellegrini
Candidate Full Name (if applicable)
Town Council
Office Sought and District
Residential Address
E-mail: debbie1947@comcast.net
Phone # (optional): 508-528-5422

Committee Name
Name of Committee Treasurer
Committee Mailing Address
E-mail:
Phone # (optional):

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>329.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>329.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>329.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0 bal.</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>0</u>

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

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

Signed under the penalties of perjury: Deborah Pellegrini (Candidate's signature) Date: Nov 22, 2021



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

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Report Being Amended: Year: 2021 Reporting Period: Beginning Date: 8/30/2021 Ending Date: 11/10/2021

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

Patrick Sheridan
Candidate Full Name (if applicable)

48 West Street, Franklin, MA 02038
Residential Address

Franklin Town Council
Office Sought and District

E-mail: Pat-Carl-Sheridan@yahoo.com

Phone # (optional): 781-801-3105

Committee to Elect Pat Sheridan Franklin
Committee Name

Ruthann O'Sullivan
Name of Committee Treasurer

175 Oak Street, Franklin, MA 02038
Committee Mailing Address

E-mail: RuthannO'Sullivan@gmail.com

Phone # (optional): 508-317-7285

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>198.47</u>
Line 2: Total receipts this period	<u>0</u>
Line 3: Subtotal	<u>198.47</u>
Line 4: Total expenditures this period	<u>196.00</u>
Line 5: Ending Balance	<u>8.47</u>
Line 6: Total in-kind contributions this period	<u>0</u>
Line 7: Total (all) outstanding liabilities	<u>0</u>
Line 8: Name of bank(s) used:	<u>Rockland Trust</u>

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

Expense of post election celebration paid from Ruthann O'Sullivan's personal account reimbursed by Committee

RECEIVED
 2021 NOV 10 PM 3:40
 TOWN OF FRANKLIN
 TOWN CLERK

Signed under the penalties of perjury:

Patrick Sheridan
(Candidate's signature)

Date: 10/25

Signed under the penalties of perjury:

Ruthann O'Sullivan
(Treasurer's signature)

Date: 11/10/2021

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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/14/2021	Mycampaignstore.com	304 Whittington Pkwy Suite 201 Louisville, KY 40223	Yard Signs/Stakes/Shipping	528.33
11/9/2021	Ruthann O'Sullivan (reimbursement)	175 Oak Street Franklin, MA 02038	Post election celebration	190.00
Line 12: Total Expenditures over \$50 (or listed above)				718.33
Line 13: Total Expenditures \$50 and under* (not listed above)				93.20
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				811.53

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



Commonwealth of Massachusetts

Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE MUNICIPAL FORM

Office of Campaign and Political Finance

File with: City / Town Clerk or Election Commission

TOWN OF FRANKLIN
TOWN CLERK

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows: **OCT 25 P 2:30**

CANDIDATE:

Full Name: Patrick Sheridan

Residential Address: 48 West Street

City / State / Zip: Franklin MA 02038

E-Mail Address: pat_carl_sheridan@yahoo.com Phone #: 7818013105

Party Affiliation: Democrat (If applicable)

OFFICE SOUGHT/PURPOSE:

Title: Franklin Town Council

District: Franklin MA at large

COMMITTEE:

Name of Committee: Committee to elect Pat Sheridan for Franklin
(The name of the committee must include the candidate's last name)

Committee Mailing Address: 48 West Street

City / State / Zip: Franklin MA 02038 Phone #: 7818013105

OFFICERS:

Chair: <u>Kristen Sheridan</u>	Treasurer*: <u>Ruuthan O'Sullivan</u>
Residential Address: <u>48 West Street</u>	Residential Address: <u>175 Oak Street</u>
City / State / Zip: <u>Franklin MA 02038</u>	City / State / Zip: <u>Franklin MA 02038</u>
Phone #: <u>781-8013106</u>	Phone #: <u>508-397-7785</u> Email: <u>Ruthannosullivan@gmail.com</u>
Other Officer/Title: _____	Other Officer/Title: _____
Residential Address: _____	Residential Address: _____
City / State / Zip: _____	City / State / Zip: _____
Phone #: _____	Phone #: _____

(Complete and attach a Form CPF M A 101, if necessary, with other officers and finance committee, if any.)

I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

Patrick C Sheridan
Candidate's signature

Date: 8/17/21

I hereby accept the office of Treasurer of the above-named committee. I affirm that I am not a public employee as defined by M.G.L. c. 55, s. 13. I understand that: 1) I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election; 2) if after my acceptance of this office I become an appointed public employee, I must resign this position and notify OCPF of my resignation; and 3) a candidate may not serve as treasurer of the political committee organized on his/her behalf.

SIGNED UNDER THE PENALTIES OF PERJURY:

Ruuthan O'Sullivan
Treasurer's signature

Date: 8/17/21

I hereby accept the office of Chairman of the above-named committee.

SIGNED UNDER THE PENALTIES OF PERJURY:

Kristen Sheridan
Chair's signature

Date: 8/17/21



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

Fill in Reporting Period dates: Beginning Date: 8/30/2021 Ending Date: 10/24/2021

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

Patrick Sheridan
Candidate Full Name (if applicable)
Franklin Town Council
Office Sought and District
48 West Street, Franklin, MA 02038
Residential Address
E-mail: pat_carl_sheridan@yahoo.com
Phone # (optional): 781-801-3105

Committee to Elect Pat Sheridan Franklin
Committee Name
Ruthann O'Sullivan
Name of Committee Treasurer
175 Oak St, Franklin, MA 02038
Committee Mailing Address
E-mail: ruthannosullivan@gmail.com
Phone # (optional): 508-397-7785

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	n/a
Line 2: Total receipts this period (page 3, line 11)	820.00
Line 3: Subtotal (line 1 plus line 2)	820.00
Line 4: Total expenditures this period (page 5, line 14)	621.53
Line 5: Ending Balance (line 3 minus line 4)	198.47
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: <u>Rockland Trust</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) Date: _____

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

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

Candidate without Committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: _____ (Candidate's signature) 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 Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8/30/2021	Patrick Sheridan 48 West St Franklin, MA 02038	30.00	*Candidate*
8/30/2021	H. Darcey Sheridan 100 Valley Rd Needham, MA 02492	50.00	
8/30/2021	Joan Sheridan 100 Valley Rd Needham, MA 02492	100.00	
9/4/2021	Raymond Milici 75 Greywolf Drive Franklin, MA 02038	50.00	
9/11/2021	Patrick Sheridan 40 West St Franklin, MA 02038	200.00	*Candidate* Teacher, Brockton, MA Public Schools
9/13/2021	Katherine O'Toole 5 Forest Street Franklin, MA 02038	50.00	
9/13/2021	Edward J. Murphy 19 Dwight Ave Natick, MA 01760	50.00	
9/14/2021	William O'Sullivan 175 Oak St Franklin, MA 02038	130.00	
10/22/2021	Claire Atwood, 27 Freedom Trail, Norfolk, MA 02056	50.00	
Line 9: Total Receipts over \$50 (or listed above)		710.00	
Line 10: Total Receipts \$50 and under* (not listed above)		110.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		820.00	← 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.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure (include CPF ID# if a contribution to another committee)	Amount
9/14/2021	Mycampaignstore.com	304 Whittington Pkwy Suite 201 Louisville, KY 40222	Yard Signs/Stakes/Shipping	528.33
Line 12: Total Expenditures over \$50 (or listed above)				528.33
Line 13: Total Expenditures \$50 and under* (not listed above)				93.20
Line 14: TOTAL EXPENDITURES IN THE PERIOD				621.53

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.



Form CPF M 102-0: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

City or Town of: Franklin Please print or type all information, except signatures.

Reporting Period: Beginning: 8/20/21 Ending: 10/25/21
(MM/DD/YYYY) (MM/DD/YYYY)

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 currently 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	PRINT NAME	SIGNATURE	RESIDENTIAL ADDRESS (Street and Number)	OFFICE SOUGHT
10/19/21	THOMAS D. MERCER	<i>[Signature]</i>	14 MERCER LANE	TOWN COUNCILOR
10/27/21	Melanie J. Hamblen	<i>[Signature]</i>	70 Daniels St	Town councilor
10/27/21	Jennifer L. St Angelo	<i>[Signature]</i>	34 Wachuset Street	School Committee
10/20/21	Christopher K. Feeley	<i>[Signature]</i>	5 Taft Dr	Board of Assessor
10/27/21	Camille N Bernsten	<i>[Signature]</i>	306 Lincoln St	School Committee
10/29/21	Deborah L. Pellegri	<i>[Signature]</i>	181 Pleasant St	Town Council
10/28/21	Bridget Sweet	<i>[Signature]</i>	1 Doe Drive	Board of Health
11/5/2021	Mary Jane Scofield	<i>[Signature]</i>	90 Pine Ridge Drive	School Committee