

OI IVIASSACHUSEUS	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 5/03/	/2017 Ending Date: 12/29/2017
Type of Report: (Check one)	
	☐ 30 day after election
Daniel L. Benjamin Jr.	Committee to Elect Daniel L. Benjamin Jr.
Candidate Full Name (if applicable)	Committee Name
Selectman, Town of Wakefield, MA	Marilyn V. Peters
Office Sought and District	Name of Committee Treasurer
10 Foster Street, Unit # 205 - Wakefield, MA 01880  Residential Address	10 Foster Street, Unit # 205 - Wakefield, MA 01880 Committee Mailing Address
E-mail: America704@aol.com	E-mail: America704@aol.com
Phone # (optional): (781) - 589 - 6910	Phone # (optional): (781) - 589 - 6910
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	\$1,487
Line 2: Total receipts this period (page 3, line 11)	O
Line 3: Subtotal (line 1 plus line 2)	\$1,487
Line 4: Total expenditures this period (page 5, lin	e 14) \$595
Line 5: Ending Balance (line 3 minus line 4)	\$892
Line 6: Total in-kind contributions this period (pa	ge 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	O
Line 8: Name of bank(s) used: The Savings Bank -	Wakefield, MA 01880
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	x 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 activity, of all persons acting under the authority or on behalf of this committee in acting under the authority or on behalf during this reporting	best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period.
Candidate without Committee OR Candidate with independent activity filing se  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of thi	best of my knowledge and belief, a true and complete statement of all campaign , in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature)  Date: 12/29/2017



of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 5	24 2017 Ending Date: 119 20 18
Type of Report: (Check one)  ☐ 8th day preceding preliminary ☐ 8th day preceding election [	30 day after election year-end report dissolution
Mehreen W.Buttenne (if applicable)  Selection  Selection  Office Sought and District  # 10  Residential Address  E-mail: mehreenne @ amail.com  Phone # (optional): 781-307-8710	Committee to Elect Melveer 12, Batter  Name of Committee Name  Name of Committee Treasurer  Source Mailing Address  E-mail: notab 26 @ sward.com  Phone # (optional):
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  Line 5: Ending Balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period (page 5, line 7: Total (all) outstanding liabilities (page 7)  Line 8: Name of bank(s) used:	6,018.45
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind or finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box Candidate with Committee and no activity independent of the committee certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee OR Candidate with independent activity filing sep I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this Signed under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign incoordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date:  Only)  best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period.  Description of my knowledge and belief, a true and complete statement of all campaign in-kind contributions and liabilities for this reporting period and represents the



# Form CPF M 102: Campaign Finance Report Municipal Form KEFIELD, MA Office of Campaign and Political Finance

2017 DEC 26 PH 2: 37

File with:

Ci

Fill in dat Reporting	es: Period Beginning	Month . <b>Ö</b>	Date 13	J:017	Ending _	L dinoM	Date 36	2017
	eport: (Check one preceding prelimin		day preceding e	lection   3	0 day after el	ection 🔀	year-end repor	rt
	<u> </u>	didate (if appl		Con	Alam	Committee	Chvis Name    anau ee Treasurer	Callaga
	600 Ca	ht and District Solven Stall Address Id Mi	<i>†</i>	.	600 Sa	a bem E		rifed
	-o clode		l'el. No. (optional)					lo. (optional)
	Line 3: Su Line 4: To Line 5: En Line 6: Tot Line 7: Tot	nding bal otal recei otal expending bal tal in-kindal	MMARY BA lance from pts this per ne 1 plus line 2) nditures th lance (line 3 r ed contributi outstanding nk(s) used_	previous riod (page 2 is period minus line 4) ions this p liabilities	report 2, line 11) (page 3, line period (pag	\$_ \$_ \$_ \$_ (14) \$_ \$_ (14) \$_ \$_ (14) \$_	266.6 266.6 266.6 266.6	8
I certify that campaign fin and represent M.G.L. c. 55	iange activity, includin ts/the:campaign financ	report including ng all contributions ce/activity of all	g attached schedule ons, loans, receipts, Il persons acting un- gued under the per	expenditures, dis der the authority	sbursements, in- or on behalf of	kind contribut f this commit	belief, a true and tions and liabilitie tee in accordance 2-26-17 Date	complete statement of a s for this reporting perio with the requirements o
	F	OR CANDI	DATE FILING	S ONLY: (C	ANDIDATE MI	UST SIGN BI	ELOW)	•
☐ Candida I certify that campaign fi have not rec ☐ Candida I certify that campaign fi	inance activity, of all evived any contribution ite without Committee t I have examined this inance activity, includi nts the campaign finan	nd no activity in report includin persons acting to as, incurred any le o OR Candidate report includin ing contribution ace activity of al	ng attached schedule under the authorify liabilities nor made te with independent ag attached schedule as, loans, receipts, e	es and it is, to the or on behalf of any expenditures t activity filing s and it is, to the expenditures, disb der the authority	this committee on my behalf deparate report e best of my knownsements, in-k- or on behalf of	in accordance uring this repo owledge and b ind contribution	with the requirer orting period. peliof, a true and comes and liabilities	complete statement of all nents of M.G.L. c. 55, complete statement of all for this reporting period with the requirements o
Candidata	signature (in ink)			<del></del>			Date	•



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

City or Town of:	Wakefield			Please print or type all information, except signatures.
Reporting Period:	Beginning:	01/01/2017 (MM/DD/YYYY)	Ending:	12/31/2017 (MM/DD/YYYY)
Type of Report: (Cl	neck One)		•	
		preceding election 30th day followi	ng election (town or special)	20th day of January (Year-End report)
<ol><li>I certify that</li></ol>	I am a candidate for or currently hold		ations during this reporting period,	and do not have a campaign fund in existence.
DATE	PRINT NAME	SIGNATURE Signed under the penalties of perjury	RESIDENTIAL ADDRESS (Street and Number)	OFFICE SOUGHT
01 / 19 / 2018	Jane A. D'Addario	Janz a. Alddaing	i Hope Теггасе	Board of Assessors
		·		
	*			



#### Form CPF M 102: Campaign Finance Report

### WAMunicipal Form Office of Campaign and Political Finance

2017 DEC 27 DW 2: 47

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 5	1/25/17 Ending Date: 12/21/17
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election	☐ 30 day after election
PAUL R. DINOCCO  Candidate Full Name (if applicable)  SELECT INEN	The DINOCCO COMMITTERE  Committee Name
Office Sought and District  VILLEY STREET  Residential Address  E-mail:	Name of Committee Treasurer
Phone # (optional): 781-745-8874	Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	576.58
Line 2: Total receipts this period (page 3, line 11	
Line 3: Subtotal (line 1 plus line 2)	576.58
Line 4: Total expenditures this period (page 5, lin	ne 14) 100.00
Line 5: Ending Balance (line 3 minus line 4)	476.58
Line 6: Total in-kind contributions this period (pa	age 6)
Line 7: Total (all) outstanding liabilities (page 7)	<i>B</i>
Line 8: Name of bank(s) used:	EASTERN BANK
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the bes activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in	contributions and liabilities for this reporting period and represents the campaign
Signed under the penalties of perjury:	(Treasurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be	ox 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 activity, of all persons acting under the authority or on behalf of this committee in an incurred any liabilities nor made any expenditures on my behalf during this reporting	e best of my knowledge and belief, a true and complete statement of all campaign finance ecordance with the requirements of M.G.L. c. 55. I have not received any contributions, g period.
Candidate without Committee OR Candidate with independent activity filing so I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	e best of my knowledge and belief, a true and complete statement of all campaign s, in-kind contributions and liabilities for this reporting period and represents the
Signed under the repulties of perjury:	70.5 Candidate Sizer Date: 12-14-2017



# Form CPF M 102: Campaign Finance Report Municipal Form WAKEFIELD, MA

Office of Campaign and Political Finance

7819 JULY -3 77 10: 17

Fill in Reporting Period dates: Beginning Date: 5/26/	/2017 Ending Date: 12/31/2017
Type of Report: (Check one)  Sth day preceding preliminary Sth day preceding election	☐ 30 day after election ⊠ year-end report ☐ dissolution
Edward Dombroski  Candidate Pull Name (if applicable)	Friends of Ed Dombroski  Committee Name
Selectman	Glen Curry
Office Sought and District  15 Chestnut St. Wakefield MA 01880	Name of Committee Treasurer 15 Chestnut St. Wakefield MA 01880
Residential Address E-mail: ed@edforwakefield.com	Committee Mailing Address
Phone # (optional): 617 290 2026	E-mail: glenRcurry@gmail.com
11.010 # (Optional).	Phone # (optional): 781 248 9451
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	100
Line 2: Total receipts this period (page 3, line 11)	O
Line 3: Subtotal (line 1 plus line 2)	100
Line 4: Total expenditures this period (page 5, line	e 14) 0
Line 5: Ending Balance (line 3 minus line 4)	100
Line 6: Total in-kind contributions this period (page	ge 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	2,124.03
Line 8: Name of bank(s) used: The Savings Bank	
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind confinance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:	ontributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	x 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 activity, of all persons acting under the authority or on behalf of this committee in acc incurred any liabilities nor made any expenditures on my behalf during this reporting	best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period.
Candidate without Committee OR Candidate with independent activity filing sep I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	best of my knowledge and belief, a true and complete statement of all campaign in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date: 1/3/2018



#### Form CPF M 102: Campaign Finance Report CLERK. Municipal Form Office of Campaign and Political Finance WAKEFIELD, MA

2010 JAN -8 PM 2: 39

File with: City or Town Clerk or Election Commission  Please print or type all information, except signatures.
Fill in dates:  Reporting Period Beginning 12   Date 31   Year   Ending 12   31   77
Type of report: (Check one)  Sth day preceding preliminary Sth day preceding election 30 day after election Sear-end report dissolution
Brian E. Falvey  Full Name of Candidate (if applicable)  Selectivan  Office Sought and District  The Andrews Residential Address  Tel. No. (optional)  Committee Name  Committee Treasurer  Andrews  Committee Mailing Address  SAMT  Tel. No. (optional)
SUMMARY BALANCE INFORMATION:  Line 1: Ending balance from previous report  Line 2: Total receipts this period (page 2, line 11)  Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this period (page 3, line 14)  Line 5: Ending balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period (page 4)  Line 7: Total (all) outstanding liabilities (page 4)  Line 8: Name of bank(s) used
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, ficluding 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 Signed under the penalties of perjury:  Treasurer's signature (in ink)  Date
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)
Affidavit of Candidate: (check 1 box only)  Candidate with Committee and no activity independent of the committee  I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.  Candidate without Committee OR Candidate with independent activity filing separate report  I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  Signed under the penalties of perjury:
Candidate signature (in ink)

# TOWN CLERK WAKETIELD, MA

2017 1111 28 周月: 38



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

of Massachusetts			
City or Town of: Wakeheld		Please p	orint or type all information, except signatures.
Reporting Period: Beginning: $5-2$	5-17 MANDDYYYYY	Ending: 12 - 3	- 17- MODAYYYY
Type of Report: (Check One)			
☐ 8th day preceding preliminary/primary ☐ 8th day p	preceding election 30th day follow	ing election (town or special) 20	h 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 M 2. I certify that I have not received any contributions, m 3. I certify that I do not have a political committee.	nade any expenditures, or incurred any oblig		not have a campaign fund in existence.
DATE PRINT NAME	SIGNATURE Signed under the penalties of penury	RESIDENTIAL ADDRESS (Street and Number)	OFFICE SOUGHT
12 28 A Patrick S. Elynn	JAMA/8	30 Coolidge Rd.	BOS
	-		



	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 5/26/2	2017 Ending Date: 12/31/2017
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election 🔀 year-end report 🗌 dissolution
	70 7
Anna Castler	Committee to Elect Anne Fortier
Anne Fortier  Candidate Full Name (if applicable)	Committee Name
Member, School Committee, Wakefield, MA	Tulio Smith-Galvin
Office Sought and District	Name of Committee Treasurer
78 Greenwood Ave, Wakefield, MA 01880	28 Grafton Street, Wakefield, MA 01880
Residential Address	Committee Mailing Address
E-mail;	E-mail:
Phone # (optional):	Phone # (optional): (781) 606-1233
	TE INICODM A TION.
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	43.43
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, lin	e 14)
Line 5: Ending Balance (line 3 minus line 4)	43.43
Line 6: Total in-kind contributions this period (pa	ge 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	606.13
Line 8: Name of bank(s) used: The Savings Bank	
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo  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 activity, of all persons acting under the authority or on behalf of this committee in activity, of all persons acting under the authority or on behalf during this reporting  Candidate without Committee OR Candidate with independent activity filing se I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loars, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date: 545/2017   x only)  best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, a period.  parate report best of my knowledge and belief, a true and complete statement of all campaign in the best of my knowledge and belief, a true and complete statement of all campaign in the kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	Date: 6/ <del>5/20</del> 17 (Candidate's signature)



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

WAKEFIELD, MA

ommonyeath	2018 JAN -8 PM 12: 25
File with: City or Town Clerk or Election Commission Please print or type	all information, except signatures.
Fill in dates: Reporting Period Beginning 12 3	200 Ending Month Bate 2019
Type of report: (Check one)  □8th day preceding preliminary □8th day preceding e	election □30 day after election ⊠year-end report □dissolution
Full Name of Candidate (if applicable)  Waking a School Committee  Orange of Candidate (if applicable)  Waking a School Committee  Orange of Candidate (if applicable)  Orange of Candidate (if applicable)  Residential Address  Tel. No. (optional	Committee Name  Chistopher McNamara Est:  Name of Committee Treasurer  Committee Mailing Address  Tel. No. (optional)
Line 1: Ending balance from Line 2: Total receipts this per Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures th Line 5: Ending balance (line 3 m  Line 6: Total in-kind contribut Line 7: Total (all) outstanding Line 8: Name of bank(s) used	riod (page 2, line 11)  s  s  s  s  s  s  s  s  s  s  s  s  s
campaign finance activity, including all contributions, loans, receipts, and represents the campaign finance activity of all persons acting un M.G.L. c. 55.  Treasurer's signature (in ink)	Date
FOR CANDIDATE FILING	GS ONLY: (CANDIDATE MUST SIGN BELOW)
campaign finance activity, of all persons acting under the authority have not received any contributions, incurred any liabilities nor made  Candidate without Committee OR Candidate with independen I certify that I have examined this report including attached schedule campaign finance activity, including contributions, loans, receipts, e and represents the campaign finance activity of all persons acting un	es and it is, to the best of my knowledge and belief, a true and complete statement of all or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I any expenditures on my behalf during this reporting period.



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

2018 JAN 22 M 8: 22

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	Jan 1, 2017 Ending Date: Dec 31, 2017
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding elec	ction 30 day after election  year-end report dissolution
Anthony Longo	Committee to Elect Tony Longo
Candidate Full Name (if applicable) Selectman	Committee Name
Office Sought and District	Frank Leone   Name of Committee Treasurer
15 Fell Street	15 Fell Street
Residential Address	Committee Mailing Address
E-mail:	E-mail:
Phone # (optional):	Phone # (optional):
SUMMARY BAL	LANCE INFORMATION:
Line 1: Ending Balance from previous repo	ort 20.21
Line 2: Total receipts this period (page 3, line)	ine 11) 0
Line 3: Subtotal (line 1 plus line 2)	20.21
Line 4: Total expenditures this period (page	e 5, line 14) 5
Line 5: Ending Balance (line 3 minus line 4	4) 15.21
Line 6: Total in-kind contributions this period	od (page 6)
Line 7: Total (all) outstanding liabilities (pa	age 7) 0
Line 8: Name of bank(s) used: The Savings B	Bank
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to activity, including all contributions, loans, receipts, expenditures, discursements in finance activity of all persons acting under the authority of or behalf of this contributions.  Signed under the penalties of perjury:	the best of my knowledge and belief, a true and complete statement of all campaign finance in kind contributions and liabilities for this reporting period and represents the campaign makes in accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date: Jan 19, 2018
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (che	eck 1 hax only)
Candidate with Committee and no activity independent of the committee  I certify that I have examined this report including attached schedules and it i	e is, to the best of my knowledge and belief, a true and complete statement of all campaign finance tee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions.
Candidate without Committee OR Candidate with independent activity I certify that I have examined this report including attached schedules and it i finance activity, including contributions, loans, receipts, expenditures, disbut campaign finance activity of all persons acting under the authorize or on believe	is, to the best of my knowledge and belief, a true and complete statement of all campaign
Signed under the penalties of perjury:	(Candidate's signature) Date: Jan 19, 2018



				_	T T UI III			~	
		Office	of Cam	paign an	d Political Finar	ıce		010	T T
Commonwealth								<u></u>	<u> </u>
of Massachusetts						File with:	: City or Town Cl	≂≘: erk or Elec	iii 🚉
Fill in Reporting Perio	od dates:	Beginning Date:	1/1/17	<del></del> . 7	Ending I		1/1/18	111	T (
<u> </u>			<u> </u>					£.75	
Type of Report: (Chec	ck one)			<del></del>		_			<u> </u>
8th day preceding preli	•	8th day preceding elec	otion [	⊐ 20 dar	after election	IJ.,	t	Vπ	issolution
Om and breesamo t		om day proceding ord			AUGL GIGGIOU	<u> </u>	ear-end report		SSOLUTION
OUR DESCRIPTION					AMERICA, 11-11-11-11-11-11-11-11-11-11-11-11-11-				
SHAUN MARGERISON Candida	ate Full Name (if a	innlicable)		COMMI	TTEE TO ELECT S		MARGERISON nittee Name	<u></u>	
BOARD OF SELECTMAN	116 1 1111 1 111111 (1	ppicaoiej				Comm	nnee mante		
	ffice Sought and Di	istrict			Na	me of Cor	mmittee Treasurer		
171 SALEM STREET, WAKE	EFIELD, MA 01	380		171 SAI	LEM STREET, WA				
	Residential Addre	SS			*		Mailing Address		
E-mail: shau	un.margerison(	@gmail.com		E-mail:	sh	aun.ma	rgerison@gma	il.com	
Phone # (optional):				Phone # (c	optional):				
					<del></del>				
		SUMMARY BAL	ANCE	INFO	RMATION:				
Line 1. E	- Us Dalama	C		i		(1)	G 20	—	
Line 1: 15	nding Baiance	e from previous repo	rt	!		8 <u>U</u>	9,29		
Line 2: To	otal receipts t	his period (page 3, li	ne 11)			<del></del>	0	.00	
	J	mo harren (ha	110 1.,	]					
Line 3: St	ubtotal (line 1	plus line 2)				80	19,29	_]	
	• • •							<b>-</b>	
Line 4: 10	otal expenditu	res this period (page	5, line	14)			0.	.00	
Line 5: Er	nding Ralance	e (line 3 minus line 4)	Υ	ſ		Cat	$\alpha \sim \alpha$	$\exists$	
	חוווא המימייה	(lille 2 minus imo -)	)	<u></u>		800	9,29	_	
Line 6: To	otal in-kind co	ontributions this perio	od (page	6)			0.	00	ı
		•	u o	ر 1					ı
Line 7: To	otal (all) outst	anding liabilities (pa	.ge 7)				0.	00	
Line 8: No	ame of bank(s	1 T. C.		1)	7			<b>-</b>	
LIMC O. TAC	IIIIe oi naiiv/a	Jusea. ING X	Wlyc	- Gant	h				
ffidavit of Committee Treasurer									
certify that I have examined this rectivity, including all contributions,	eport including atta	iched schedules and it is, to t	the best of a	my knowled	dge and belief, a true	and comp	plete statement of	all campai	gn finance
nance activity of all persons acting	g under the authori	ty or on behalf of this comm	n-king com iittee in acc	indutions at ordance wit	nd traditities for this in the the requirements o	fM.G.L.	репод апа гергезе с. 55.	ints the can	npaign
igned under the penalties of perj	jury:				(Treasurer's s	signature)	Date:		
OR CANDIDATE FILIN	GS ONLY: A	ffidavit of Candidate: (che-	ck 1 box or	nlv)			-		
Candidate with Committee a	-	·		******	•				
I certify that I have examined the	his report including	g attached schedules and it is	s, to the bes	st of my kno	owledge and belief, a	true and	complete statemer	it of all car	mpaign finance
activity, of all persons acting us incurred any liabilities nor mad	inder the authority of	or on behalf of this committe	ee in accord	dance with t	he requirements of N	1.G.L. c. 5	55. I have not rece	sived any o	contributions,
Candidate without Committe									
<ul> <li>I certify that I have examined the</li> </ul>	his report including	g attached schedules and it is	s, to the bes	t of my kno	wledge and belief, a	true and o	complete statemen	it of all can	npaign
Inance activity, including cont campaign finance activity of all	ributions, loans; re l persons acting un	ceipts, expenditures, disburs ider the authority or on behal	ements, in- If of this co	kind contrit	butions and liabilities accordance with the	s for this r	eporting period ar	ાd represen લ	its the
		X X					Date: 1		
igned under the penalties of perj	ury:	<del>'}</del>			(Candidate's s	signature)		144110	



Signed under the penalties of perjury:

#### Form CPF M 102: Campaign Finance Report

Municipal Form CLERK .
Office of Campaign and Political Finance

2018 JAN 17 PM 12: 24 of Massachusetts File with: City or Town Clerk or Election Commission 1/1/2017 Ending Date: 12/31/2017 Fill in Reporting Period dates: Beginning Date: Type of Report: (Check one) year-end report dissolution 8th day preceding preliminary 8th day preceding election 30 day after election The Committee TO Sleet
Committee Name LLCCTMAN Office Sought and District Foundame Low WANG FALL Committee Mailing Address Ander Lave Workefield PITHEDIA COMENST. NOT Phone # (optional): Phone # (optional): **SUMMARY BALANCE INFORMATION:** Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11)  $\bigcirc$  .00 Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) 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) Line 8: Name of bank(s) used: THE 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. (Treasurer's signature) Signed under the penalties of perjury: 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.

(Candidate's signature)



# Form CPF M 102-0: Campaign Finance Report LERK Municipal Form WAKEFIELD, MA Municipal Form

Office of Campaign and Political Finance

2010 JEN 3 PK 12: 23 Please print or type all information, except signatures.

City or Town of: Wakefield	field	The state of the s	And the state of t	TATAL TO THE PROPERTY OF THE P
Reporting Period:	Beginning: 05/16/2017	6/2017	Ending: 01/20/2018	
,		(MM/DD/YYYY)	AND THE PROPERTY OF THE PROPER	(MM/DD/YYYY)
	-	The state of the s	The state of the s	
Type of Report: (Check One)	)ne)			
8th day preceding pre	liminary/primary	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:	ter 55:			-

Pursu

- 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.

					Alison Mel	DATE PRINT NAME
					Alex roll	SIGNATURE Signed under the penalties of perjury
					14 Audubon Rd., Unit 455	RESIDENTIAL ADDRESS (Street and Number)
					Board of Health	OFFICE SOUGHT

\$\\ \$\\



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

2016 HAY 13 MI 11: 44

City of Town of Wakefield		d sense I	r tease print or type at information, except signatures
Reporting Feriod: Beginning:	(AAAAAGG/WW)	Ending: TOWN CLEMA	(XXXX/GG/WW)
Type of Report: (Check One)		And the state of t	
Sth day preceding preliminary/primary Sth	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.	ld 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.	is, made any expenditures, or incurred any obli	gations during this reporting period, and do	not have a campaign fund in existence.
DATE PRINT NAME	SIGNATURE Signed under the penalties of perjury	RESIDENTIAL ADDRESS (Street and Number)	OFFICE SOUGHT
5/13/12 Jeffrey Quinn	Alm D:	753 Main S).	Library Trustees
All the state of t			



Office of Campaign and Political Finance

2010 TAN 05 AN 9: 49

(Candidate's signature)

of Massachusetts		File with: City or Town Clerk or Election Commission
Fill in Reporting Period	dates: Beginning Date: 12 -	-31-1 6 Ending Date: $12-31-1$
Type of Report: (Check	one)	
8th day preceding preliming	nary 8th day preceding election	30 day after election  year-end report dissolution
Candidate B Confice	sidential Addréss 01880	Comm. to Flect Ann M. Santos  Committee Name  Name of Committee Treasurer  39 Conveyse St., Wakefield, MA  Committee Mailing Address  E-mail:  Phone # (optional):
	SUMMARY BALANCE	INFORMATION:
Line 1: End	ling Balance from previous report	1438,47
Line 2: Tota	al receipts this period (page 3, line 11)	$\phi$
Line 3: Sub	total (line 1 plus line 2)	1438,47
Line 4: Tota	al expenditures this period (page 5, line 1	(4)
Line 5: End	ling Balance (line 3 minus line 4)	1438.47
Line 6: Tota	al in-kind contributions this period (page	6) Ø
Line 7: Tota	al (all) outstanding liabilities (page 7)	$\phi$
Line 8: Nam	ne of bank(s) used: The Savin	gs Bank, Wakefield, Md 1880
activity, including all contributions, to	ort including attached schedules and it is, to the best of roans, receipts, expenditures, disbursements, in-kind contained in the authority or on behalf of this committee in accordance.	my knowledge and belief, a true and complete statement of all campaign finance tributions and liabilities for this reporting period and represents the campaign ordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjur	ry:	(Treasurer's signature) Date:
FOR CANDIDATE FILING	S ONLY: Affidavit of Candidate: (check 1 box or	nly)
certify that I have examined this activity, of all persons acting unde	I no activity independent of the committee s report including attached schedules and it is, to the bes ler the authority or on behalf of this committee in accord any expenditures on my behalf during this reporting per	st of my knowledge and belief, a true and complete statement of all campaign finance dance with the requirements of M.G.L. c. 55. I have not received any contributions, riod.
I certify that I have examined this finance activity, including contrib	butions, loans, receipts, expenditures, disbursements, in-	rate report st of my knowledge and belief, a true and complete statement of all campaign kind contributions and liabilities for this reporting period and represents the mimittee in accordance with the requirements of M.G.L. c. 55.



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

City or Town of:	WAKEFI	ELD	_			•	
-	Pl	ease print or typ	e all informat	ion, except sign	iatures.	٠.	•
Fill in dates: Reporting Period Begin	Month ning /	Day.	Year 17	Ending_	fouth (	Day 2	Year 18
	· · · · · · · · · · · · · · · · · · ·		· .				
Type of Report: (Chec			. 🗆 .				Oil devetTerror
8th day precedin preliminary/prim	_	preceding electi		th day followin wn or Special)			Oth-day of January ear-End Report)
Pursuant to M.G.L., Ch	apter 55:						
<ol> <li>I certify that I am</li> <li>I certify that I ha reporting period,</li> <li>I certify that I do</li> </ol>	ve not received any and do not have a	contributions, is campaign fund in committee.	nade any exp n existence.			•	
	. SIGNATURE ler the penalties of	1		FIAL ADDRES ad Number)	SS	III. OI	FFICE SOUGHT
/10/18 Cina	4 CeSchar	8	Cordis.	St-		Leb.	Trustoe
	<i>/</i>	Ø.					
	<del></del>		,	· <del>_</del>			
							•
	•	· .		-			
			-	•			
			:				
-					,		
	•				-		

11/97



# Form CPF M 102: Campaign Finance Reported Municipal Form WAKEFIELD, MA Office of Campaign and Political Finance

Massachusetts		•		2018 JAN -	3 關 /:	31 _	
ile with: ity or Town (	Clerk or Election Commission Ple	ase print or type a	ll informatio	n, except signatures	•		
Fill in da Reportin	ates:  g Period Beginning May	Date 12,	Year 2017	Ending Dece		•	Year .017
	report: (Check one) y preceding preliminary	n day preceding el	ection 3	0 day after election	Lyear-en	d report □	dissolution
	Betsy Sheeran  Full Name of Candidate (if approximate of Candidate (if approximate of Candidate (if approximate of Candidate (if approximate of Candidate of Cand	ict	Com	Kichard W. Name of Con 27 Spruce St	nittee Name Pearson nmittee Treas	urer refield, M	A (880 otional)
	Line 1: Ending bath Line 2: Total recent Line 3: Subtotal (Line 4: Total expending bath Line 5: Ending bath Line 6: Total in-kith Line 7: Total (all) Line 8: Name of bath Line 8: Name of bath Line 1: Line 1	cipts this per line 1 plus line 2) enditures thin clance (line 3 m and contribution	previous iod (page 2 is period inus line 4) ons this p iabilities	(page 3, line 14)  oeriod (page 4)  (page 4)	\$ 1,59 \$ 9 \$ 1,59 \$ 1,59 \$ \$ 1,59	5,35 5,35 5,35 5,35	
I certify the campaign and represe M.G.L. c.	(Xchard & , Tob	tions, loans, receipts, 6 all persons acting und Signed under the pen	expenditures, di ler the authority alties of perjur	sbursements, in-kind co or on behalf of this c y:	ntributions and ommittee in accommittee in accommit	nabilities for u	nis reporting period the requirements of
I Candi I certify ( campaigr have not ☐ Candi I certify (	t of Candidate: (check I box only) idate with Committee and no activity that I have examined this report include in finance activity, of all persons actin received any contributions, incurred an idate without Committee OR Candid that I have examined this report include in finance activity, including contributions the campaign finance activity of	independent of the coing attached schedules g under the authority of y liabilities nor made a ate with independent ling attached schedules ons, loans, receipts, exall persons acting under the p	ommittee s and it is, to the or on behalf of any expenditure activity filing s and it is, to the ependitures, disl der the authority	this committee in acco s on my behalf during the separate report the best of my knowledge pursements, in-kind con y or on behalf of this co	and belief, a trance with the is reporting per and belief, a tributions and l	requirements of od. rue and completiabilities for the ordance with the	of M.G.L. c. 55. 1  ete statement of all  is reporting period  the requirements of



# Form CPF M 102: Campaign Finance Report

Municipal Form
Office of Campaigh and Political Finance | 3

of Massachusetts	File with: City or Town Clerk or Election Commission					
Fill in Reporting Period dates: Beginning Date: 1/1/2017 Ending Date: 12/31/2017						
Type of Report: (Check one)						
8th day preceding preliminary 8th day preceding election	30 day after election   year-end report   dissolution					
Robert Anthony Edmund Tiro  Candidate Full Name (if applicable)	Committee to Elect Rob Tiro  Committee Name					
School Committee Wakefield	Linda Mendonca					
Office Sought and District	Name of Committee Treasurer					
15 Collette Road Wakefield, MA 01880  Residential Address	15 Collette Road Wakefield, MA 01880  Committee Mailing Address					
E-mail:	E-mail:					
Phone # (optional):	Phone # (optional):					
SUMMARY BALANC	TE INFORMATION:					
Line 1: Ending Balance from previous report	\$32.40					
Line 2: Total receipts this period (page 3, line 11)						
Line 3: Subtotal (line 1 plus line 2) \$32.40						
Line 4: Total expenditures this period (page 5, line 14)						
Line 5: Ending Balance (line 3 minus line 4) \$32.40						
Line 6: Total in-kind contributions this period (pa	oge 6) 0					
Line 7: Total (all) outstanding liabilities (page 7)						
Line 8: Name of bank(s) used: The Savings Bank						
Affidavit of Committee Treasurer:  Lectify that I have examined this report 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:  Date: 2/4/18						
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	x 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 activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting	best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period.					
Candidate without Committee OR Candidate with independent activity filing sell certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on trials of the contributions.	best of my knowledge and belief, a true and complete statement of all campaign with kind contributions and liabilities for this reporting period and represents the					
Signed under the penalties of perjury:	(Candidate's signature) Date: Z/5/18					



Fill in Reporting Period dates: Beginning Date: 6/1/2017 Ending Date: 12/31/2017					
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election	☐ 30 day after election  ☐ year-end report ☐ dissolution				
JOSEPH SEBASTIANO TRINGALE  Candidate Full Name (if applicable)  LIBRARY TRUSTEE, WAKEFIELD  Office Sought and District  33 BROOK ST. WAKEFIELD  Residential Address  E-mail: JTRINGALE@SDL.COM  Phone # (optional):	COMMITTEE TO ELECT JOSEPH S TRINGALE  Committee Name  JOSEPH VINCENT TRINGALE  Name of Committee Treasurer  33 BROOK ST. WAKEFIELD  Committee Mailing Address  E-mail:  JVT1234@YAHOO.COM  Phone # (optional):				
SUMMARY BALANCI	E 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  Line 5: Ending Balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period (page  Line 7: Total (all) outstanding liabilities (page 7)  Line 8: Name of bank(s) used: THE SAVINGS BANK	150.00 0 150.00 150.00				
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:    Value   Value					



#### Form CPF M 102: Campaign Finance Report

**Municipal Form** TOWN CLERK WAKEFIELD, MA Office of Campaign and Political Finance

of Massachusetts 7019 14 - 2 M 8: 15  File with: City or Town Clerk or Election Commission					
Fill in Reporting Period dates: Beginning Date:	3017 Ending Date:   2/3/2017				
Type of Report: (Check one)					
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution				
Albert J. Turco  Candidate Full Name (if applicable)	Committee To Elect Albert J. Three Committee Name				
,	Daniel C. Calore				
Office Sought and District  16 Indian Lane, Wakefield MA01986  Residential Address	Name of Committee Treasurer  16 Indian Lane, Watefield MA 01880  Committee Mailing Address				
Telephone Number (optional): 751-245-0444	Telephone Number (optional):				
SUMMARY BALANC	CE INFORMATION:				
Line 1: Ending Balance from previous report	957,88				
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)					
Line 5: Ending Balance (line 3 minus line 4)	757.88				
Line 6: Total in-kind contributions this period (pa	age 6)				
Line 7: Total (all) outstanding liabilities (page 7)					
Line 8: Name of bank(s) used: Wakefield	Co-operative Bank				
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbut sements, in-kind finance activity of all persons acting under the authority or on behalf of his committee in Signed under the penalties of perjury:	condibutions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.				
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo					
Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in actineurred any liabilities nor made any expenditures on my behalf during this reporting	be best of my knowledge and belief, a true and complete statement of all campaign finance ecordance with the requirements of M.G.L. c. 55. I have not received any contributions, g period.				
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of the	s, in-kind contributions and liabilities for this reporting period and represents the is committee in accordance with the requirements of M.G.L. c. 55.				
Signed under the negatives of perjury:	(Candidate's signature) Date: Tan hary 2,201				



# Form CPF M 102: Campaign Signassic. Municipal Boim.

846 day pa 	Carilation Full Marca (of equilication)	Corner-Hee to Guerran Telescopes  Corner-Hee to Guerran Telescopes
<u>Миль</u> , С 10 (д., . сей. сей Родин	Common Structured Digital Company Common Structure Common	Auto Manalistralis Transis.  Shaff all P.D. Mankerfalls Was  Carriets Mules Autric  1.0 (1971) 1981;
· [	SUMMARY DALANCE IN	FORMATION:
	Line 1: Ending Balance from pserious report	५०मः १९
	Line 2: Total receipts this period (page 3, line 11)	
	Line 3: Subtotal (line 1 plus line 2)	504.14
	Line 4: 'Fetal expenditures this period (page 5, line 14)	
Define and the second	Line 5: Ending Balance (line 3 misms line 4)	50429 J
	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:	ys Bank-
posty, no 1100 surve (sile for good sust for OR CAN) Contil for sorrily &	the possible of projury!  DEDATE FULINGS OF LY: Ambiguit of Carolicatel (check is few roll)  in this Consulting and no activity independent of the commune.  in this Consulting and no activity independent of the commune. On the best of a longer than a support of the second in a consultation of the second in a second i	(1) the rate of figures.  (1) the rate of figures.  (2) the rate of figures.  (3) the rate of figures.  (4) the rate of figures.  (5) the rate of figures.  (6) the rate of figures.  (7) the rate of figures.  (8) the rate of figures.  (9) the rate of figures.  (1) the rate of figures.  (1) the rate of figures.  (2) the rate of figures.  (3) the rate of figures.  (4) the rate of figures.  (5) the rate of figures.  (6) the rate of figures.  (7) the rate of figures.  (8) the rate of figures.  (9) the rate of figures.  (1) the rate of figures.  (2) the rate of figures.  (3) the rate of figures.  (4) the rate of figures.  (5) the rate of figures.  (6) the rate of figures.  (7) the rate of figures.  (9) the rate of figures.  (1) the rate of figures.  (1) the rate of figures.  (2) the rate of figures.  (3) the rate of figures.  (4) the rate of figures.  (5) the rate of figures.  (6) the rate of figures.  (7) the rate of figures.  (8) the rate of figures.  (9) the rate of figures.  (1) the rate of figures.  (1) the rate of figures.  (2) the rate of figures.  (3) the rate of figures.  (4) the rate of figures.  (5) the rate of figures.  (6) the rate of figures.  (7) the rate of figures.  (8) the rate of figures.  (9) the rate of figures.  (1) the rate of figures.  (1) the rate of figures.  (2) the rate of figures.  (3) the rate of figures.  (4) the rate of figures.  (5) the rate of figures.  (6) the rate of figures.  (7) the rate of figures.  (8) the rate of figures.  (9) the rate of figures.  (1) the rate of figures.  (1) the rate of figures.  (1) the rate of figures.  (2) the rate of figures.  (3) the rate of figures.  (4) the rate of figures.  (5) the rate of figures.  (6) the rate of figures.  (7) the rate of figures.  (8) the rate of figures.  (9) the rate of figures.  (1) the rate of figures.  (1) the rate of figures.  (2) the rate of figures.  (3) the rate of figures.  (4) the rate of figures.  (5) the rate of figures.  (6) the rate of fi
paceally R o	the financial in the control of the	produced Newscale Constitution



Municipal Form TOWN CLERK
Office of Campaign and Political Finance WAKEFIELD, MA

7018 JEN 23 円 12: 39

	715 715
File with:	
	Discounded on the all information arount dispatures
City or Town Clerk or Election Commission	Please print or type all information, except signatures.

Fill in dates: Reporting Period Beginning	Fear 7 Ending 12-31-17					
Type of report: (Check one)  ☐8th day preceding preliminary ☐8th day preceding election ☐30 day after election Zyear-end report ☐dissolution						
Full Name of Candidate (if applicable)  WK Fd School Com  Office Sought, and District  HZ WHVE HUL WK Fd  Residential Address  Tel. No. (optional)	MORGAN Committee  Loven Campbell  Name of Committee Treasurer  + 2 Wave + Ve. WKfc.  Committee Mailing Address  Tel. No. (optional)					
SUMMARY BALANCE INFORMATION:  Line 1: Ending balance from previous report  Line 2: Total receipts this period (page 2, line 11)  Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this period (page 3, line 14)  Line 5: Ending balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period (page 4)  Line 7: Total (all) outstanding liabilities (page 4)  Line 8: Name of bank(s) used wateradd Coop bank						
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  Signed under the penalties of perjury:						
Treasurer's signature (in ink)	Date .					
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)						
campaign finance activity, of all persons acting under the authority or on have not received any contributions, incurred any liabilities nor made any e Candidate without Committee OR Candidate with independent activity that I have examined this report including attached schedules and campaign finance activity, including contributions, loans, receipts, expendent	it is, to the best of my knowledge and belief, a true and complete statement of all behalf of this committee in accordance with the requirements of M.G.L. c. 55. I expenditures on my behalf during this reporting period. Vity filing separate report it is, to the best of my knowledge and belief, a true and complete statement of all litures, disbursements, in kind contributions and liabilities for this reporting period are authority or on behalf of this committee in accordance with the requirements of					