



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN CLERK'S OFFICE

2020 MAR 9 10 38  
File with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/2020 Ending Date: 03/6/2020

Type of Report: (Check one)

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

Paul MacKay  
Candidate Full Name (if applicable)

Trustees of The Punchard Free School  
Office Sought and District

21 Fossen Way, Andover MA 01810  
Residential Address

E-mail: ptm1951@yahoo.com

Phone # (optional): (978) 475-4451

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:	

**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: *James Murphy* (Candidate's signature)      Date: 3/9/2020

















Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN CLERK'S OFFICE  
2020 JUN -1 P 6:37

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2020 Ending Date: 6/1/2020

### Type of Report: (Check one)

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

Lauren Conoscenti  
Candidate Full Name (if applicable)  
Andover School Committee  
Office Sought and District  
129 Rattlesnake Hill Road, Andover MA 01810  
Residential Address  
E-mail: LConoscenti@yahoo.com  
Phone # (optional): (617) 669-3000

Lauren Conoscenti for Andover  
Committee Name  
Thomas Esposito  
Name of Committee Treasurer  
129 Rattlesnake Hill Road  
Committee Mailing Address  
E-mail: tmesposito00@gmail.com  
Phone # (optional): (617) 504-1899

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	4,780
Line 3: Subtotal (line 1 plus line 2)	4,780
Line 4: Total expenditures this period (page 5, line 14)	2,966.49
Line 5: Ending Balance (line 3 minus line 4)	1,813.51
Line 6: Total in-kind contributions this period (page 6)	100
Line 7: Total (all) outstanding liabilities (page 7)	3,095.29
Line 8: Name of bank(s) used:	Citizens 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: Thomas Esposito (Treasurer's signature) Date: 6/1/2020

#### 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: Lauren Conoscenti (Candidate's signature) Date: 6/1/2020

## 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)
2/3/2020	Lucia Alvarez 2940 Old Orchard Rd Davie, FL 33328	100	
1/21/2020	Linn Anderson 94 Abbot St Andover, MA 01810	100	
2/4/2020	Trevor Barcelo 23 Woodhaven Dr Andover, MA 01810	100	
1/6/2020	Faisal Bashir 21 Ballardvale Rd Andover, MA 01810	100	
1/18/2020	Sara Blais 12 Coventry Ln Andover, MA 01810	100	
2/13/2020	Susan Bond 5 Enfield Dr Andover, MA 01810	100	
1/14/2020	Elizabeth Buckley 9 Sutherland St Andover, MA 01810	75	
1/6/2020	Breanne Buzay 7 Ellsworth Rd Andover, MA 01810	100	
2/3/2020	Erin Condon 614 SW 27th St Gainesville, FL 32607	75	
1/22/2020	Marilyn Conoscenti 150 Pineview Ln Coram, NY 11727	100	
3/17/2020	Thomas Conoscenti 150 Pineview Ln Coram, NY 11727	100	
2/15/2020	Catherine Durbin 476 S Cedar Run Williamston, MI 48895	75	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>			← 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)
2/6/2020	Judy Eskin 3 Athena Circle Andover, MA 01810	100	
2/10/2020	Joyce Esposito 12 Janell Lane Farmingville, NY 11738	100	
1/6/2020	Thomas Esposito 12 Janell Lane Farmingville, NY 11738	100	
2/21/2020	Celina Griffin 13 Farrwood Dr Andover, MA 01810	250	Pharmacist, Takeda
1/11/2020	Gerry Gustus 5 Fern Rd Andover, MA 01810	100	
2/4/2020	Sara Hinchey 12 Fossen Way Andover, MA 01810	100	
1/6/2020	Amy Hollman 18 Canterbury St Andover, MA 01810	75	
1/25/2020	Ann Knowles 51 Maple Ave Andover, MA 01810	100	
2/16/2020	Remi Machet 264 Andover St Andover, MA 01810	100	
1/15/2020	Cynthia Meyersburg 14 Fairbank St Harvard, MA 01451	200	Teaching Fellow, Harvard University
2/4/2020	Tram Nguyen 1 Brookfield Rd Andover, MA 01810	100	
2/9/2020	Pamela Poindexter 11 Paulornette Circle Andover, MA 01810	100	
1/13/2020	Mary Pritchard 399 River Rd Andover, MA 01810	100	

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

*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)
2/9/2020	Elizabeth Raponi 12 Ridge St Andover, MA 01810	100	
3/16/2020	Joseph Ruma 15 Blueberry Hill Rd Andover, MA 01810	75	
1/6/2020	Jessica Sharkness 82 Cliffe Ave Lexington, MA 02420	100	
3/10/2020	Mark Veligor 13 Lowell Junction Rd Andover, MA 01810	100	
1/14/2020	Bonnie Zahorik 2 Granli Dr Andover, MA 01810	200	Retired
<b>Line 9: Total Receipts over \$50 (or listed above)</b>		3225.00	
<b>Line 10: Total Receipts \$50 and under* (not listed above)</b>		1555.00	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		4780.00	← 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
5/31/2020	ActBlue	366 Summer St Somerville, MA 02144	fees for contribution by credit card	60.3
3/1/2020	Sara Blais	12 Coventry Lane Andover, MA 01810	Reimbursement (See R1)	300
2/22/2020	Home Depot	72 Pleasant Valley St Methuen, MA 01844	Wood for signs	37.61
2/26/2020	North of Boston Media Group	100 Turnpike St North Andover, MA 01845	Andover Townsman political advertisements	425
3/9/2020	North of Boston Media Group	100 Turnpike St North Andover, MA 01845	Andover Townsman political advertisements	425
2/3/2020	Potter's Printing, Inc.	822 Eastern Ave Fall River, MA 02723	Polycoat signs	262.54
5/6/2020	Potter's Printing, Inc.	822 Eastern Ave Fall River, MA 02723	Lawn signs	221.99
3/9/2020	US Postal Service	10 Stevens St Andover, MA 01810	Postage stamps	550
2/26/2020	Vistaprint	275 Wyman St Waltham, MA 02451	Postcards	444.77
5/12/2020	Vistaprint	275 Wyman St Waltham, MA 02451	Postcards	99.53
5/31/2020	wepay	350 Convention Way #200 Redwood City, CA, 94063	Fees for contribution by credit card	124.75
Line 12: Total Expenditures over \$50 (or listed above)				2,951.49
Line 13: Total Expenditures \$50 and under* (not listed above)				15
<b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				<b>2,966.49</b>

Enter on page 1, line 4 →

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

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

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

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
1/6/2020	Raphael Brickman	15 Locke St Andover, MA 01810	Graphic design	100
			Line 15: In-Kind Contributions over \$50 (or listed above)	100
			Line 16: In-Kind Contributions \$50 & under (not listed above)	0
Enter on page 1, line 6 →			<b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>	<b>100</b>

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





Commonwealth of Massachusetts

# Form CPF R 1: Itemization of Reimbursements Office of Campaign and Political Finance

Office of Campaign and Political Finance  
One Ashburton Place, Room 411  
Boston, MA 02108  
(617) 979-8300

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

Date of Reimbursement:

Name of Individual Being Reimbursed:



Committee Name:

CPF ID Number (if applicable):  Telephone Number (optional):

### ITEMIZE EXPENDITURES IN EXCESS OF \$50

Date Paid	Vendor Name	Vendor Address	Purpose of Expenditure	Amount
2/14/2020	North of Boston Media Group	100 Turnpike St North Andover, MA 01845	Andover Townsman political advertisements	\$300.00
(Include items listed on Page 2) → Line 1: Expenditures in excess of \$50 (itemized above):				<input type="text" value="300"/>
Line 2: Expenditures \$50 or under (not itemized):				<input type="text"/>
<b>Line 3: TOTAL AMOUNT REIMBURSED:</b>				<input type="text" value="300"/>

Signed under the penalties of perjury:

Signature of Candidate / Treasurer

Date:

Please prepare a separate report for each reimbursement check issued by the committee.



Commonwealth  
of Massachusetts

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

RECEIVED  
TOWN CLERK'S OFFICE

CPF ID# 17434

File with: Director  
Office of Campaign and Political Finance  
One Ashburton Place Rm. 411  
Boston, MA 02108  
(617) 979-8300

2020 JUN -1 A 10:12

Reporting Period: Beginning: 1/1/2020 Ending: 5/22/2020

TOWN OF ANDOVER, MASS

Type of Report: 2020 Pre-election Report

**Doherty, Sheila**

Full Name of Candidate

**Municipal, Local Filer**

Office Sought/ District

**9 Juniper Road  
Andover, MA 01810**

Residential Address

**Doherty Committee**

Committee Name

**James Doherty**

Name of Committee Treasurer

**45 Martingale Lane  
Andover, MA 01810**

Committee Address

**SUMMARY BALANCE INFORMATION**

Ending balance from previous report:	\$268.89
Total receipts this period:	\$0.00
Subtotal:	\$268.89
Total expenditures this period:	\$0.00
Ending Balance:	\$268.89
<hr/>	
Total inkind contributions this period:	\$0.00
Total out of pocket spending this period:	\$0.00
Total outstanding liabilities:	\$0.00
Name of Bank 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, inkind 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:

*James Doherty*  
Treasurer's Signature (in ink)

5/26/2020  
Date

**Affidavit of Candidate (check 1 box only) :**

Candidate with Committee and no activity independent of the committee

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

Candidate without Committee OR candidate with independent activity filing separate report.

I certify that I have examined this report and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity including contributions, loans, receipts, expenditures, disbursements, disbursements,

inkind 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:

*Sheila M Doherty* 5/26/2020



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN CLERK'S OFFICE

2020 JUN -14 A 9:11 AM

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 1, 2020 Ending Date: May 22, 2020

Type of Report: (Check one)

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

Laura M. Gregory  
Candidate Full Name (if applicable)

Andover Select Board, Town of Andover  
Office Sought and District

5 Embassy Lane, Andover, MA 01810  
Residential Address

E-mail: lmejergregory@yahoo.com

Phone # (optional): \_\_\_\_\_

Committee to Elect Laura Gregory  
Committee Name

Sara A.W. Blais  
Name of Committee Treasurer

12 Coventry Lane, Andover, MA 01810  
Committee Mailing Address

E-mail: salexiswells@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)	4,011
Line 3: Subtotal (line 1 plus line 2)	4,011
Line 4: Total expenditures this period (page 5, line 14)	3,352.96
Line 5: Ending Balance (line 3 minus line 4)	658.04
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>Citizens Bank</u>

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

Signed under the penalties of perjury: Sara A.W. Blais (Treasurer's signature) Date: 6/3/20

**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: Laura M. Gregory (Candidate's signature) Date: 6/3/20

## 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)
Mar 2, 2020	Antonellis, Anthony 25 Northern Avenue #902 Boston, MA 02210	500	Partner at Sloane and Walsh, LLP
Feb 7, 2020	Bashir, Faisal 21 Ballardvale Road Andover, MA 01810	100	
Jan 27, 2020	Blais, Sara 12 Coventry Lane Andover, MA 01810	100	
Feb 6, 2020	Blumstein, Joel 3 Athena Circle Andover, MA 01810	100	
Feb 12, 2020	Dailey, William 114 Marrett Road Lexington, MA 02421	150	
Mar 3, 2020	Donovan, John 19 Valley Road Natick, MA 01760	100	
Mar 5, 2020	Finegold, Barry 42 Stirling Street Andover, MA 01810	200	Partner at Dalton & Finegold LLP
Feb 13, 2020	French, Alan 17 Moreland Avenue Andover, MA 01810	100	
Feb 20, 2020	Hinchey, Edward 44 Pier 7 Charlestown, MA 02129	200	Partner at Sloane and Walsh, LLP
Feb 15, 2020	Hollman, Amy 18 Canterbury Street Andover, MA 01810	100	
Feb 25, 2020	Johnson, Mark 24 Greybirch Road Andover, MA 01810	200	Partner at Johnson & Borenstein, LLC
Feb 3, 2020	Kerrigan, Michael 550 Belmont Street #23 Watertown, MA 02472	156	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>			← 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)
Feb 1, 2020	Koh, Daniel 21 Windemere Drive Andover, MA 01810	250	Chief Operating Officer at HqO
Feb 15, 2020	MacGregor, Alec 2 Granli Drive Andover, MA 01810	100	
Feb 11, 2020	Machet, Remi 264 Andover Street Andover, MA 01810	100	
Feb 1, 2020	Nguyen, Tram 1 Brookfield Road Andover, MA 01810	100	
Feb 9, 2020	Pondexter, Pam 11 Paulomette Circle Andover, MA 01810	100	
Feb 17, 2020	Sassin, Michael 8 Stevens Circle Andover, MA 01810	100	
Feb 5, 2020	Scully, Matthew 34 School Street Andover, MA 01810	150	
Feb 11, 2020	Stott, Susan 30 Pasho Street Andover, MA 01810	100	
Mar 11, 2020	Sullivan, Brian 6 High Street Apt. A Rockport, MA 01966	100	
Mar 15, 2020	Syed, Badra Alam 8 Keystone Way Andover, MA 01810	100	
Line 9: Total Receipts over \$50 (or listed above)		3,206	
Line 10: Total Receipts \$50 and under* (not listed above)		805	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		4,011	← 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
Feb 14, 2020	The Eagle-Tribune	100 Turnpike Street North Andover, MA 01845	advertising in Andover Townsmen	300
Feb 14, 2020	Potter's Printing	822 Eastern Avenue Fall River, MA 02723	lawn signs	533.1
Feb 4, 2020	Sticker Giant	880 Weaver Park Road Longmont, CO 08501	lawn sign stickers	165.74
Mar 3, 2020	United States Post Office	on-line	postcard stamps	1,401.8
Apr 1, 2020	United States Post Office	on-line	postcard stamps	526.8
Feb 18, 2020	VistaPrint	275 Wyman Street Waltham, MA 02451	printing of postcards	216.93
Apr 2, 2020	VistaPrint	275 Wyman Street Waltham, MA 02451	printing of postcards	80.41
Jan 25, 2020	Wordpress	60 29th Street #343 San Francisco, CA 94110	website hosting	51
Line 12: Total Expenditures over \$50 (or listed above)				3,275.78
Line 13: Total Expenditures \$50 and under* (not listed above)				77.18
Enter on page 1, line 4 → <b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				<b>3,352.96</b>

\* 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

RECEIVED  
TOWN CLERK'S OFFICE

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/15/20 Ending Date: 6/1/20

Type of Report: (Check one)

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

Amy Marie Hafensteiner  
Candidate Full Name (if applicable)

School Committee  
Office Sought and District

19 Kirkland Dr. Andover MA 01810  
Residential Address

E-mail: amyh1122@gmail.com

Phone # (optional): 840-930-8570

Amy Hafensteiner for School Committee  
Committee Name

Jacob Hafensteiner  
Name of Committee Treasurer

19 Kirkland Dr. Andover MA 01810  
Committee Mailing Address

E-mail: jakehafen@gmail.com

Phone # (optional): 617-756-9939

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0.00</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$940.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$940.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$549.43</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$390.57</u>
Line 6: Total in-kind contributions this period (page 6)	<u>\$896.75</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>\$ 0.00</u>
Line 8: Name of bank(s) used:	<u>Bank of America</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: 6/1/20

#### 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: Amy M. Hafensteiner (Candidate's signature)

Date: 6/1/20

## 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)
2/3/20	Jennifer Ross 66 Brookfield Rd. Andover MA 01810	\$100	
2/4/20	Kathleen MacNeil 129 Clubhouse Lane Northbridge MA 01534	\$500	Partner, Millenium Partners Boston
3/2/20	David Matson 124 Rattlesnake Hill Rd Andover MA 01810	\$20	
3/3/20	Tara Bodine 164 Beacon Street Andover MA 01810	\$50	
3/5/20	Shelley Penna 3 Sandybrook Circle Andover MA 01810	\$200	Nurse Practitioner, Dermatology Associates of Winchester
3/21/20	Feng Xiao 17 Kirkland Dr. Andover MA 01810	\$30	
5/19/20	Patricia Rich 89 Greenwood Rd Andover MA 01810	\$20	
2/17/20	Sam Hatensteiner 2316 North 17th Ave Pensacola, FL 32503	\$20	

Line 9: Total Receipts over \$50 (or listed above) \$700

Line 10: Total Receipts \$50 and under\* (not listed above) \$240

**Line 11: TOTAL RECEIPTS IN THE PERIOD** **\$940**

← 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
1/15/20	GoDaddy.com	14455 N. Hayden Rd. suite 226 Scottsdale AZ 85260	initiation fee AmyforAll.com	\$12.17
1/15/20	"	"	monthly hosting fee for AmyforAll.com	\$21.25
1/18/20	"	"	site add on AmyforAll.com	\$25.37
2/15/20	"	"	monthly hosting fee for AmyforAll.com	\$21.25
3/15/20	"	"	"	\$21.25
4/15/20	"	"	"	\$21.25
5/15/20	"	"	"	\$21.25
2/14/20	Got Print.com	7651 N. San Fernando Rd Burbank CA 91505	yard signs and business cards	\$405.64
Line 12: Total Expenditures over \$50 (or listed above)				405.64
Line 13: Total Expenditures \$50 and under* (not listed above)				143.79
Line 14: TOTAL EXPENDITURES IN THE PERIOD				549.43

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.



# Manage your Billing

[Subscriptions](#)

[Order History](#)

9 results

Bulk Actions

Filters

<input type="checkbox"/>			
<input type="checkbox"/>	<a href="#">1685810550</a>	5/15/2020	\$21.25 USD
<input type="checkbox"/>	<a href="#">1668322304</a>	4/15/2020	\$21.25 USD
<input type="checkbox"/>	<a href="#">1650435385</a>	3/15/2020	\$21.25 USD
<input type="checkbox"/>	<a href="#">1634591256</a>	2/15/2020	\$21.25 USD
<input type="checkbox"/>	<a href="#">1619187411</a>	1/18/2020	\$25.37 USD
<input type="checkbox"/>	<a href="#">1617762266</a>	1/15/2020	\$21.25 USD
<input type="checkbox"/>	<a href="#">1617759450</a>		

1617707400

1/15/2020

**\$12.17 USD**



1616405599R

REFUND

1/15/2020

**( \$12.17 USD )**



1616405599

1/12/2020

**\$12.17 USD**

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Do not sell my personal information

Hello Mobile User!  
 Use our **DESKTOP VERSION** and  
**GET 10% OFF**  
 up to \$100 Use code  
THX2020  
 We are working to accommodate  
 mobile orders very soon!




## Order Confirmation

Order Number: US-GP-100-24624609

Create Time: Feb 2, 2020 11:12:14 AM PST

### Actions

[Print Invoice](#)

No.	Product	Quantity	Total Price	Tax	Status																								
1	 <b>Yard Signs</b> COLOR: Full Color Both Sides SIZE: 12" x 18" Horizontal MATERIAL: 4mm Corrugated Plastic with Semi-Gloss Surface SHAPE: Rectangle PRODUCTION TIME: Regular <b>FRONT: Amy for SC.png BACK: Amy            for SC.png</b> <b>Instant Processing Proof</b> <b>Metal Step Stake</b> <b>Reuploads:</b> 1. Feb 10, 2020 5:59:56 AM PST FRONT: Amy for SC.png, BACK: Amy for SC.png	100	\$298.89	Y	Shipped																								
<table border="1"> <thead> <tr> <th>Tracking Number</th> <th>Carrier</th> <th>Notes</th> <th>Create Time</th> </tr> </thead> <tbody> <tr> <td><b><u>1Z8E5A2103250</u></b> <b><u>95453</u></b></td> <td>UPS</td> <td></td> <td>Feb 14, 2020 2:27:43 PM PST</td> </tr> <tr> <td><b><u>1Z8E5A2103269</u></b> <b><u>56691</u></b></td> <td>UPS</td> <td></td> <td>Feb 14, 2020 2:27:50 PM PST</td> </tr> <tr> <td><b><u>1Z8E5A2103291</u></b> <b><u>95276</u></b></td> <td>UPS</td> <td></td> <td>Feb 14, 2020 2:27:47 PM PST</td> </tr> <tr> <td><b><u>1Z8E5A2103318</u></b> <b><u>20282</u></b></td> <td>UPS</td> <td></td> <td>Feb 14, 2020 2:27:49 PM PST</td> </tr> <tr> <td><b><u>1Z8E5A2103339</u></b> <b><u>25666</u></b></td> <td>UPS</td> <td></td> <td>Feb 14, 2020 2:27:45 PM PST</td> </tr> </tbody> </table>						Tracking Number	Carrier	Notes	Create Time	<b><u>1Z8E5A2103250</u></b> <b><u>95453</u></b>	UPS		Feb 14, 2020 2:27:43 PM PST	<b><u>1Z8E5A2103269</u></b> <b><u>56691</u></b>	UPS		Feb 14, 2020 2:27:50 PM PST	<b><u>1Z8E5A2103291</u></b> <b><u>95276</u></b>	UPS		Feb 14, 2020 2:27:47 PM PST	<b><u>1Z8E5A2103318</u></b> <b><u>20282</u></b>	UPS		Feb 14, 2020 2:27:49 PM PST	<b><u>1Z8E5A2103339</u></b> <b><u>25666</u></b>	UPS		Feb 14, 2020 2:27:45 PM PST
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<b><u>1Z8E5A2103318</u></b> <b><u>20282</u></b>	UPS		Feb 14, 2020 2:27:49 PM PST																										
<b><u>1Z8E5A2103339</u></b> <b><u>25666</u></b>	UPS		Feb 14, 2020 2:27:45 PM PST																										
2	<b>Business Cards</b>	2,500	\$37.10	Y	Shipped																								



COLOR: Full Color Front, No Back  
 SIZE: 2" x 3.5" Horizontal U.S.  
 Standard PAPER: 14 pt. Gloss Cover  
 PRODUCTION TIME: Regular

FRONT: [card-001.png](#)

**Instant Processing Proof**  
**High Gloss UV Coating Front**

**Reuploads:**

1. Feb 10, 2020 6:46:02 AM PST  
FRONT: AmyForALL Business Card.png
2. Feb 10, 2020 7:07:23 AM PST  
FRONT: AmyForALL Business Card.png

Tracking Number	Carrier	Notes	Create Time
<a href="#">1Z8E5A2103034</a> <a href="#">19233</a>	UPS		Feb 11, 2020 7:01:23 AM PST

Subtotal: \$335.99  
 Shipping and Handling : \$84.35  
 Tax (6.2500%): \$18.90  
 Coupon [NEW2020]: (\$33.60)  
**Total: \$405.64**

**Billing**

Name Amy Hafensteiner  
 Ending in \*\*\*3238  
 Type MasterCard  
 Exp Month September  
 Exp Year 2024

**Shipping**

Shipping Method Standard (1-6 business days)  
 Shipping Style Normal (included)

**Billing Address**

First Name AMY  
 Last Name HAFENSTEINER  
 Company  
 Phone [8609308570](#)  
 Fax  
 Street Address 19 KIRKLAND DR  
 Apt/Unit  
 City ANDOVER  
 State Massachusetts  
 Zip Code 01810  
 Country United States  
 Email campaign@amyforall.com

**Shipping Address**

First Name AMY  
 Last Name HAFENSTEINER  
 Company  
 Phone [8609308570](#)  
 Fax  
 Street Address 19 KIRKLAND DR  
 Apt/Unit  
 City ANDOVER  
 State Massachusetts  
 Zip Code 01810  
 Country United States

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

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

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
3/5/20	Lauren Kinney	6 Scotland Dr. Andover MA 01810	Door Hangers	\$225.61
3/2/20	Brianna Rowley	17 Old school/house #4 Andover MA 01810	100 18x24 lawn signs + wire stakes	\$671.14
Line 15: In-Kind Contributions over \$50 (or listed above)				896.75
Line 16: In-Kind Contributions \$50 & under (not listed above)				0.00
Enter on page 1, line 6 → <b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>				896.75

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

**Fwd: Your Vistaprint Order Is Confirmed**

Lauren Kinney <l.kinney.mph@gmail.com>  
To: Amy Hafensteiner <amyh1122@gmail.com>

Fri, Mar 6, 7:07 PM

----- Forwarded message -----  
From: **Vistaprint** <vistaprint@tm.vistaprint.com>  
Date: Thu, Mar 5, 2020 at 4:31 PM  
Subject: Your Vistaprint Order Is Confirmed  
To: <l.kinney.mph@gmail.com>

Your Vistaprint Order Confirmation



[Add Vistaprint to your address book](#)

My Account: 3305-4588-6698

**THANK YOU FOR YOUR ORDER**      Your Order Number: **838PC-R5A47-4V8** • Track It

Hi lauren,

**Here are your order details:**

Order Date: **3/5/2020**  
Delivery Option (\*): **Express**

You can expect to receive items in your order by:  
Small Door Hanger March 10

Payment Type : Visa

**Order Summary**

**Small Door Hangers**

Qty: 2500

Base Price \$177.35

Item Total **\$177.35**



[Edit Your Design](#)

Merchandise: \$177.35  
Shipping Charges: \$34.99  
Sales Tax: \$13.27  
**Total: \$225.61**

**Sold By**

Vistaprint Netherlands BV  
Hudsonweg 8  
Venlo, The Netherlands 5928LW

**Shipping To:**

lauren kinney  
6 Scotland Drive  
ANDOVER MA 01810  
US

**Edit Shipping Address**

(Address cannot be updated after your order has printed.)

**Billed To:**

lauren kinney  
6 Scotland Drive

ANDOVER MA 01810  
US

**Need Help?**

[Click here to contact our Customer Care Team](#)



Absolutely Guaranteed Every time. Any reason. Or we'll make it right.

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This email address is unmonitored, so please don't reply.  
Offers expire 3/30/2020 at 11:59 PM (PT).

Limit one promo code per order. Savings will be reflected in your shopping cart. Discounts may vary by quantity and design and can't be applied to shipping and processing, taxes, subscription or design services, previous purchases or products on the Vistaprint Promotional Products site, unless otherwise specified. Additional fees may apply for shipping and processing, and taxes, unless otherwise noted. Free offers valid only on the lowest quantity of each product and not valid on more than 2 items per order.

Vistaprint may change or cancel this offer at any time. See website for details.

Vistaprint, a Cimpress Company | 275 Wyman Street | Waltham, MA 02451

PCI 2643335 PCO 912726 T 62

**Fwd: Your Vistaprint Order Is Confirmed**

**Brianna Sinon Rowley** <bsinrow10@gmail.com>  
To: Amy Hafensteiner <amyh1122@gmail.com>

Wed, Jun 3, 8:51 AM

----- Forwarded message -----  
From: **Vistaprint** <vistaprint@tm.vistaprint.com>  
Date: Wed, Jun 3, 2020 at 8:50 AM  
Subject: Your Vistaprint Order Is Confirmed  
To: <bsinrow10@gmail.com>

Your Vistaprint Order Confirmation



[Add Vistaprint to your address book](#)

My Account: 1574-3049-5861

**THANK YOU FOR YOUR ORDER** Your Order Number: **C7ZB7-R5A52-0J7** • Track It

Hi Brianna,

**Here are your order details:**

Order Date: **3/2/2020**  
Delivery Option (\*): **Express**

You can expect to receive items in your order by:

- 18" x 24" Full color (design & text) yard sign March 5
- Wire Stake 24" x 10" March 5

Payment Type : Visa

**Order Summary**



[Edit Your Design](#)

<b>18" x 24" Full color (design &amp; text) yard signs</b>	
Qty: 100	
Base Price	<del>\$546.67</del> <b>\$409.44</b>
Item Total	<b>\$409.44</b>

<b>Wire Stakes 24" x 10"</b>	
Qty: 100	
Base Price	<del>\$250.00</del> <b>\$187.23</b>
Item Total	<b>\$187.23</b>

Merchandise: \$596.67  
Shipping Charges: \$34.99  
Sales Tax: \$39.48  
**Total: \$671.14**

**Sold By**

Vistaprint Netherlands BV  
Hudsonweg 8  
Venlo, The Netherlands 5928LW

**Shipping To:**

Brianna Rowley  
A:PAC  
17 Old Schoolhouse Road  
Andover MA 01810  
US

**Edit Shipping Address**

(Address cannot be updated after your order has printed.)

**Billed To:**

Brianna Rowley  
A:PAC  
17 Old Schoolhouse Road  
Andover MA 01810  
US

**Need Help?**

[Click here to contact our Customer Care Team](#)



**Absolutely Guaranteed** Every time. Any reason. Or we'll make it right.

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This email address is unmonitored, so please don't reply.  
Offers expire 6/28/2020. at 11:59 PM (PT).

Limit one promo code per order. Savings will be reflected in your shopping cart. Discounts may vary by quantity and design and can't be applied to shipping and processing, taxes, subscription or design services, previous purchases or products on the Vistaprint Promotional Products site, unless otherwise specified. Additional fees may apply for shipping and processing, and taxes, unless otherwise noted. Free offers valid only on the lowest quantity of each product and not valid on more than 2 items per order.

Vistaprint may change or cancel this offer at any time. See website for details.

Vistaprint, a Cimpress Company | 275 Wyman Street | Waltham, MA 02451

PCI 1892728 PCO 912726 T 62





Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN CLERK'S OFFICE

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 21, 2020 Ending Date: May 22, 2020

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

Paul Thompson MacKay  
Candidate Full Name (if applicable)  
Trustees of Punchard Free School  
Office Sought and District  
21 Fossen Way, Andover MA  
Residential Address  
E-mail: ptm1951@yahoo.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	<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>0</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>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: Paul Thompson MacKay (Candidate's signature) Date: May 22, 2020















Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN CLERK'S OFFICE  
2020 JUN -1 P 6:38

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Jan 1 2020 Ending Date: May 22, 2020

Type of Report: (Check one)

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

<u>MARGARET V. O'CONNOR</u> Candidate Full Name (if applicable)	<del>Committee Name</del>
<u>HOUSING AUTHORITY</u> Office Sought and District	<del>Name of Committee Treasurer</del>
<u>22 Railroad St, Andover MA</u> Residential Address	<del>Committee Mailing Address</del>
E-mail: <u>margaret.oconnor@memorex.com</u>	E-mail: _____
Phone # (optional): <u>978-475-5993</u>	Phone # (optional): _____

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<del>_____</del>
Line 2: Total receipts this period (page 3, line 11)	<del>_____</del>
Line 3: Subtotal (line 1 plus line 2)	<del>_____</del>
Line 4: Total expenditures this period (page 5, line 14)	<del>_____</del>
Line 5: Ending Balance (line 3 minus line 4)	<del>_____</del>
Line 6: Total in-kind contributions this period (page 6)	<del>_____</del>
Line 7: Total (all) outstanding liabilities (page 7)	<del>_____</del>
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: Margaret O'connor (Candidate's signature) Date: May 26, 2020

*I have received no funds -  
I have no committee  
I have no bank account*







**SCHEDULE B: EXPENDITURES (continued)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Line 12: Expenditures over \$50 (or listed above)				
Line 13: Expenditures \$50 and under* (not listed above)				
<b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				

Enter on page 1, line 4 →

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



**SCHEDULE 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 → <b>Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)</b>				

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

Stephen Prochniak  
 Candidate Full Name (if applicable)  
 Select Board Andover Ma 01810  
 Office Sought and District  
 116 Dascomb Road, andover Ma 01810  
 Residential Address  
 E-mail: sprocj5@gm<sup>ail</sup>.com  
 Phone # (optional): 978-416-18 33

Committee to Elect Stephen Prochniak  
 Committee Name  
 Jane Gifun  
 Name of Committee Treasurer  
 9 Castle Heights Road, Andover ,MA 01810  
 Committee Mailing Address  
 E-mail: fleecy.god<sup>mother@verizon</sup>.com  
 Phone # (optional): 978-475-86 69

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending Balance from previous report	0.00
Line 2: Total receipts this period (page 3, line 11)	908.00
Line 3: Subtotal (line 1 plus line 2)	908.00
Line 4: Total expenditures this period (page 5, line 14)	695.42
Line 5: Ending Balance (line 3 minus line 4)	212.58
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:	Enterprise 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: Jane Gifun (Treasurer's signature) Date: 05/28/2020

**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: Stephen Prochniak (Candidate's signature) Date: 05/28/2020

RECEIVED  
 TOWN CLERK'S OFFICE  
 2020 JUN - 1 P 6:36  
 TOWN OF ANDOVER, MASS

Schedule A: Receipts

Committee to Elect Stephen Prochniak

Filing period 01/01/2020 – 06/01/2020 (revised 5/25/2020)

Date Received	Name and Residential Address	Amount	Occupation & Employer (for contributions over \$200.00)
02/25/2020	Jane M Gifun 9 Castle Heights Road Andover Ma 01810	310.00	Retired, previous teaching assistant Professional Center for Child Development
03/04/2020	Jane M Gifun	250.00	
03/01/2020	John F & Eugenie M Moffitt 68 Beacon Street Andover Ma 01810	250.00	Retired

Line 9: total Receipts over \$50.00 810.00

Line 10 Total Receipts \$50.00 and under (not listed above) 98.00

**Line 11: TOTAL RECEIPTS IN THE PERIOD 908.00**

Schedule B: Expenditures

Committee to Elect Stephen Prochniak

Filing period 01/01/2020 – 05/01/2020

(revised 5/25/2020)

Date Pd	To Whom Paid	Address	Purpose of Expenditure	Amount
02/25/2020	24 houryardsign	2151 Denton Ave. Cookeville, TN 38501	Yard Signs cc	193.00
02/24/2020	Enterprise Bank	High Street Andover, Ma 01810	Checks	22.88
02/20/020	Enterprise bank		Service fee	10.00
02/25/2020	Enterprise Bank		Service fee	35.00
02/29/2020	Fishelli'e Pastry Shop	55 Union St Lawrence, Ma 01840	Cookies cc	51.00
03/10/2020	LaPlume	1 Farley Street Lawrence. Ma 01843	Post Cards	90.31
03/17/2020	LaPlume			47.81
02/29/2020	Stop & Shop	209 N Main St Andover, Ma 01810	Bottle water, milk and 1/2/&1/2	19.43
03/09/2020	USPS	10 Stevens Street Andover, Ma 01810	Posy Card stamps	70.00
03/18/2020	USPS			70.00
05/23/2020	USPS			35.00
02/28/2020	VistaPrint	9250 Red Rock Rd Reno, NV 89508	Business cards cc	50.99

Line 12: Total Expenditures over \$50.00 or listed above 695.42

Line 13: Total Expenditures \$50.00 and under (not listed) 0.00

Line 14: **TOTAL EXPENDITURES IN THE PERIOD 695.42**

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

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

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-Kind Contributions over \$50 (or listed above)				
Line 16: In-Kind Contributions \$50 & under (not listed above)				
<b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>				0.00

Enter on page 1, line 6 →

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

Schedule D Liabilities

01/01/2020 – 03/06/2020 revised 5/28/2020

Date Incurred	To whom due	address	purpose	amount
				0



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN CLERK'S OFFICE

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Jan 1, 2020 Ending Date: May 22, 2020

### Type of Report: (Check one)

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

Donald F. Schroeder Candidate Full Name (if applicable) Trustee of the Punchard Free School Office Sought and District 204 Haggetts Pond Road Residential Address E-mail: <u>dschroed153@AOL.COM</u> Phone # (optional): <u>978-681-9509</u>	 Committee Name  Name of Committee Treasurer  Committee Mailing Address E-mail: Phone # (optional):
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### 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>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: Donald F. Schroeder (Candidate's signature) Date: May 25, 2020

RECEIVED  
TOWN CLERK'S OFFICE



# Form CPF M 102: Campaign Finance Report - 2 A 9:02 Municipal Form

Office of Campaign and Political Finance

TOWN OF ANDOVER, MASS

File with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/2020 Ending Date: 05/22/2020

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

Shishan Wang  
Candidate Full Name (if applicable)  
Andover School Committee  
Office Sought and District  
10 Brady Loop, Andover MA 01810  
Residential Address  
E-mail \_\_\_\_\_  
Phone # (optional) \_\_\_\_\_

Committee to Elect Shishan Wang  
Committee Name  
Zhenhua Sun  
Name of Committee Treasurer  
10 Brady Loop, Andover MA 0  
Committee Mailing Address  
E-mail \_\_\_\_\_  
Phone # (optional) \_\_\_\_\_

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending Balance from previous report	17.48
Line 2: Total receipts this period (page 3, line 11)	895
Line 3: Subtotal (line 1 plus line 2)	912.48
Line 4: Total expenditures this period (page 5, line 14)	1752.31
Line 5: Ending Balance (line 3 minus line 4)	-839.83
Line 6: Total in-kind contributions this period (page 6)	839.83
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	<u>Enterprise 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: 05/31/2020

**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: Shishan Wang (Candidate's signature) Date: 06/01/2020

### 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)
02/09/2020	Chih-Yu Tang, 99 River St, Andover MA 01810	100	
03/20/2020	Jiening Lai, 4 Hearthstone Pl, Andover MA 01810	100	
02/11/2020	Rong Zhou, 1 Christian Way, Andover MA 01810	100	
1/30/2020	Shishan Wang, 10 Brady Loop, Andover MA 01810	100	
2/4/2020	W. Lee, P.O. Box 2119, Andover MA 01810	100	
Line 9: Total Receipts over \$50 (or listed above)		500	
Line 10: Total Receipts \$50 and under* (not listed above)		395	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		<b>895</b>	← 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
3/12/2020	Connolly Printing, LLC	17B Gill St, Woburn MA 01801	Postcard printing and postage	1752.31
Line 12: Total Expenditures over \$50 (or listed above)				1752.31
Line 13: Total Expenditures \$50 and under* (not listed above)				60.34
<b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				<b>1812.65</b>

Enter on page 1, line 4 →

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



### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

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

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
3/12/2020	Shishan Wang	10 Brady Loop	Postcard printing and postage	839.83
Line 15: In-Kind Contributions over \$50 (or listed above)				839.83
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				839.83

Enter on page 1, line 6 →

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

