



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2020 DEC 31 AM 9:09
File with: City or Town Clerk or Election Commission

TOWN OF ANDOVER, MASS

Fill in Reporting Period dates: Beginning Date: 01/01/2020 Ending Date: 12/31/2020

Type of Report: (Check one)

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

Jose L. Albuquerque
Candidate Full Name (if applicable)
Select Board, Andover, MA
Office Sought and District
197 Greenwood Road, Andover, MA 01810
Residential Address
E-mail: jlalbuquerque@yahoo.com
Phone # (optional):

Committee to Elect Joe Albuquerque
Committee Name
Edward J. Hayes
Name of Committee Treasurer
197 Greenwood Road, Andover, MA 01810
Committee Mailing Address
E-mail: jlalbuquerque@yahoo.com
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	93.20
Line 2: Total receipts this period (page 3, line 11)	7.35
Line 3: Subtotal (line 1 plus line 2)	100.55
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	100.55
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:	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: Edward J. Hayes (Treasurer's signature) Date: 1/3/21

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

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

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

Signed under the penalties of perjury: Jose L. Albuquerque (Candidate's signature) Date: 1/3/2021

SCHEDULE A: RECEIPTS

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)		0	
Line 10: Total Receipts \$50 and under* (not listed above)		7.35	
Line 11: TOTAL RECEIPTS IN THE PERIOD		7.35	← 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)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

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

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
			Line 12: Total Expenditures over \$50 (or listed above)	0
			Line 13: Total Expenditures \$50 and under* (not listed above)	0
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	0

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

SCHEDULE 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)	
			Line 14: TOTAL EXPENDITURES IN THE PERIOD	

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 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-Kind Contributions over \$50 (or listed above)				0
Line 16: In-Kind Contributions \$50 & under (not listed above)				0
Line 17: TOTAL IN-KIND CONTRIBUTIONS				0

Enter on page 1, line 6 →

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

SCHEDULE D: LIABILITIES

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

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



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN -6 AM 10:32

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2020 Ending Date: 12/31/2020
TOWN OF ANDOVER, MASS

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

Joel Blumstein
Candidate Full Name (if applicable)

Andover School Committee
Office Sought and District

3 Athena Circle, Andover, MA 01810
Residential Address

E-mail: jejb95@gmail.com

Phone # (optional): _____

Committee to Elect Joel Blumstein
Committee Name

Irene Pien
Name of Committee Treasurer

234 Causeway St, Unit 809, Boston, MA 02114
Committee Mailing Address

E-mail: ipien@comcast.net

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	0.00
Line 2: Total receipts this period (page 3, line 11)	0.00
Line 3: Subtotal (line 1 plus line 2)	0.00
Line 4: Total expenditures this period (page 5, line 14)	0.00
Line 5: Ending Balance (line 3 minus line 4)	0.00
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: Irene Pien (Treasurer's signature) Date: 1/5/2021

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

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

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

Signed under the penalties of perjury: Joel Blumstein (Candidate's signature) Date: 1/6/2021

SCHEDULE A: RECEIPTS

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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		0.00	← Enter on page 1, line 2

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

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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		0.00	← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

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

(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
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				0.00

Enter on page 1, line 4 →

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

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

Line 12: Expenditures over \$50 (or listed above) 0.00

Line 13: Expenditures \$50 and under* (not listed above) 0.00

Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD** **0.00**

* 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
Line 15: In-Kind Contributions over \$50 (or listed above)				
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				0.00

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

SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				0.00



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 20 PM 3:47

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 7/10/2020 Ending Date: 7/31/2020
TOWN OF ANDOVER, MASS

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, Andover, MA 01810
Committee Mailing Address

E-mail: tmesposito00@yahoo.com

Phone # (optional): (617) 504-1899

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	57.74
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	57.74
Line 4: Total expenditures this period (page 5, line 14)	19.02
Line 5: Ending Balance (line 3 minus line 4)	38.72
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	1,100
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: 1/20/21

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 1/20/2021

SCHEDULE A: RECEIPTS

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)		0	
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		0	← Enter on page 1, line 2

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

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

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

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

Line 12: Total Expenditures over \$50 (or listed above)	0
Line 13: Total Expenditures \$50 and under* (not listed above)	19.02
Line 14: TOTAL EXPENDITURES IN THE PERIOD	19.02

Enter on page 1, line 4 →

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

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)	
			Line 14: TOTAL EXPENDITURES IN THE PERIOD	

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
Line 15: In-Kind Contributions over \$50 (or listed above)				0
Line 16: In-Kind Contributions \$50 & under (not listed above)				0
Line 17: TOTAL IN-KIND CONTRIBUTIONS				0

Enter on page 1, line 6 →

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

SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount
3/5/2020	Lauren Conoscenti	129 Rattlesnake Hill Road Andover, MA 01810	Loan to purchase postage stamps	1,100
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				1,100



Commonwealth
of Massachusetts

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

RECEIVED
TOWN CLERK'S OFFICE

File with: Director
Office of Campaign and Political Finance
One Ashburton Place Rm. 411
Boston, MA 02104
(617) 979-8300

2021 JAN 20 10:49:39
CPF-102-17434

TOWN OF ANDOVER, MASS

Reporting Period: Beginning: 6/30/2020 Ending: 12/31/2020

Type of Report: 2020 Year-end 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:

Treasurer's Signature (in ink)

1/19/21
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.

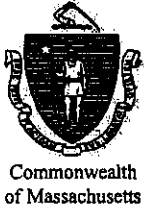
Candidate without Committee OR candidate with independent activity filing separate report.

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 1/20/21



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE
2020 DEC 31 AM 9:06

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Jan 1, 2020 Ending Date: Dec 31, 2020

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

Marilyn M. Fitzgerald
Candidate Full Name (if applicable)
Graded Lawrence Reg. Voc. Tech School Comm.
Office Sought and District
25 Washington Ave, Andover, MA 01810
Residential Address
Telephone Number (optional): 978 806 6532

Committee to Elect Marilyn Fitzgerald
Committee Name
Michael Spring
Name of Committee Treasurer
16 Brady Loop Andover MA 01810
Committee Mailing Address
Telephone Number (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: [Signature] (Treasurer's signature) Date: 12-31-20

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

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

Candidate without Committee OR Candidate with independent activity filing separate report
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 12-31-20

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)

Line 9: Total Receipts over \$50 (or listed above) - 0 -

Line 10: Total Receipts \$50 and under* (not listed above) - 0 -

Line 11: **TOTAL RECEIPTS IN THE PERIOD** - 0 -

← Enter on page 1, line 2

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

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)

Line 9: Total Receipts over \$50 (or listed above) ~ 0 ~

Line 10: Total Receipts \$50 and under* (not listed above) ~ 0 ~

Line 11: TOTAL RECEIPTS IN THE PERIOD ~ 0 ~

← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

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

(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
Line 12: Total Expenditures over \$50 (or listed above)				- 0 -
Line 13: Total Expenditures \$50 and under* (not listed above)				- 0 -
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				- 0 -

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

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

Line 12: Expenditures over \$50 (or listed above)	✓ 10 -
Line 13: Expenditures \$50 and under* (not listed above)	✓ 5 -
Line 14: TOTAL EXPENDITURES IN THE PERIOD	15 -

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
			Line 15: In-Kind Contributions over \$50 (or listed above)	- 0 -
			Line 16: In-Kind Contributions \$50 & under (not listed above)	- 0 -
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	- 0 -

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer. Page 6

SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount

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

— 0 —

RECEIVED
TOWN CLERK'S OFFICE



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

2021 JAN 20 PM 12:09
TOWN OF ANDOVER, MASS

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 1, 2020 Ending Date: December 31, 2020

Type of Report: (Check one)

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

Ann W. Gilbert
Candidate Full Name (if applicable)
Town of Andover Selectboard
Office Sought and District
12 Gray Road, Andover, MA 01810
Residential Address
E-mail: annegilbert@verizon.net
Phone # (optional): _____

Committee to Elect Annie Gilbert
Committee Name
Sara A. W. Blais
Name of Committee Treasurer
12 Coventry Lane, Andover, MA 01810
Committee Mailing Address
E-mail: saletswells@gmail.com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report
Line 2: Total receipts this period (page 3, line 11)
Line 3: Subtotal (line 1 plus line 2)
Line 4: Total expenditures this period (page 5, line 14)
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: 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: Sara A. W. Blais (Treasurer's signature) Date: 1/3/21

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

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

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

Signed under the penalties of perjury: Ann W. Gilbert (Candidate's signature) Date: 1/16/21

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 19 PM 12:09

TOWN OF ANDOVER, MASS

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

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

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

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

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				

* 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 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)	
--	--

Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITURES IN THE PERIOD	
---------------------------	--	--

* 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
Line 15: In-Kind Contributions over \$50 (or listed above)				
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer. Page 6



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

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Report Being Amended: Year: 2020 Reporting Period: Beginning Date: 1/1/2020 Ending Date: 12/31/2020

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

Daniel T. Grams
Candidate Full Name (if applicable)

28 Corbett St. Andover, MA 01810
Residential Address

Andover Housing Authority
Office Sought and District

E-mail: Dannygrams@gmail.com

Phone # (optional): 978 886 0928

Friends of Daniel Grams
Committee Name

Joshua E. Dallal
Name of Committee Treasurer

28 Corbett St. Andover, MA 01810
Committee Mailing Address

E-mail: joshua@dallal.org

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>\$1,742.45</u>
Line 2: Total receipts this period	<u>0</u>
Line 3: Subtotal	<u>0</u>
Line 4: Total expenditures this period	<u>0</u>
Line 5: Ending Balance	<u>\$1,742.45</u>
Line 6: Total in-kind contributions this period	<u>0</u>
Line 7: Total (all) outstanding liabilities	<u>0</u>
Line 8: Name of bank(s) used:	<u>Santander</u>

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

When filing the original report I ~~was~~ left out a 4 in lines 1 & 5. I wrote ~~172.45~~ instead of 1,742.45. I being the treasurer.

RECEIVED
TOWN CLERK'S OFFICE
JAN 25 PM 3:39
TOWN OF ANDOVER, MASS

Signed under the penalties of perjury:

Signed under the penalties of perjury:

(Candidate's signature)

Date: _____

Joshua E. Dallal
(Treasurer's signature)

Date: 1/19/21



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 15 AM 11:28
File with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2020 Ending Date: 12/31/2020
TOWN OF ANDOVER, MASS

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

Daniel T Grams
Candidate Full Name (if applicable)
Andover Housing Authority
Office Sought and District
28 Corbett st. Andover, MA, 01810
Residential Address
E-mail: Dannygrams@gmail.com
Phone # (optional): 978 886 0928

Friends of Daniel Grams
Committee Name
Joshua E. Dallal
Name of Committee Treasurer
28 Corbett st. Andover, MA, 01810
Committee Mailing Address
E-mail: joshua@dallal.org
Phone # (optional): 978 270 1911

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>172.45</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>172.45</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>Santander</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: Joshua E. Dallal (Treasurer's signature) Date: 1/13/2021

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

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

Candidate without Committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: Daniel T. Grams (Candidate's signature) Date: 1/14/2021

SCHEDULE A: RECEIPTS

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)		0	
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		0	← Enter on page 1, line 2

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

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)

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

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

Page 3

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
Line 12: Total Expenditures over \$50 (or listed above)				0
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Line 14: TOTAL EXPENDITURES IN THE PERIOD				0

Enter on page 1, line 4 →

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

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Line 12: Expenditures over \$50 (or listed above)				0
Line 13: Expenditures \$50 and under* (not listed above)				0
Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITURES IN THE PERIOD			0

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

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

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

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-Kind Contributions over \$50 (or listed above)				0
Line 16: In-Kind Contributions \$50 & under (not listed above)				0
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				0

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

SCHEDULE D: LIABILITIES

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

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



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 19 PM 12:09

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: June 30, 2020 Ending Date: December 31, 2020
TOWN OF ANDOVER, MASS

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: lmeyergregory@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	655.04
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	655.04
Line 4: Total expenditures this period (page 5, line 14)	18.00
Line 5: Ending Balance (line 3 minus line 4)	637.04
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:	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: Sara A. W. Blais (Treasurer's signature) Date: 1/3/21

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: Laura M. Gregory (Candidate's signature) Date: Jan 16, 2021

SCHEDULE A: RECEIPTS

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

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

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)

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

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

Line 11: TOTAL RECEIPTS IN THE PERIOD

← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

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

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				18.00
Line 14: TOTAL EXPENDITURES IN THE PERIOD				18.00

Enter on page 1, line 4 →

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

SCHEDULE 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)	
			Line 14: TOTAL EXPENDITURES IN THE PERIOD	

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
			Line 15: In-Kind Contributions over \$50 (or listed above)	
			Line 16: In-Kind Contributions \$50 & under (not listed above)	
			Line 17: TOTAL IN-KIND CONTRIBUTIONS	

Enter on page 1, line 6 →

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

SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount

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



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 25 PM 4:20

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 12/31/2019 Ending Date: 12/31/2020

Type of Report: (Check one)

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

Christian C. Huntress
Candidate Full Name (if applicable)

Board of Selectmen, Andover, MA
Office Sought and District

17 Tewksbury Street, Andover, MA 01810
Residential Address

F-mail: _____

Phone # (optional): _____

Committee to Elect Christian Huntress
Committee Name

John Kiely
Name of Committee Treasurer

17 Tewksbury Street, Andover, MA 01810
Committee Mailing Address

F-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	424.1
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	424.1
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	424.1
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	1,000
Line 8: Name of bank(s) used:	Northmark Bank - Andover

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury: John Kiely (Treasurer's signature) Date: Jan 21, 2021

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

Candidate with Committee and no activity independent of the committee

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

Candidate without Committee OR Candidate with independent activity filing separate report

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

Signed under the penalties of perjury: Christian C. Huntress (Candidate's signature) Date: 01/21/2021

SCHEDULE A: RECEIPTS

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)		0	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		0	← Enter on page 1, line 2

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

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

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

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

Line 12: Total Expenditures over \$50 (or listed above)	0
Line 13: Total Expenditures \$50 and under* (not listed above)	0
Line 14: TOTAL EXPENDITURES IN THE PERIOD	0

Enter on page 1, line 4 →

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

SCHEDULE 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)	
--	--

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD	
--	--

* 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
Line 15: In-Kind Contributions over \$50 (or listed above)				
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				

Enter on page 1, line 6 →

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

SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount
12/18/2017	Christian HUntress	17 Tewksbury Street Andover, MA 01810	Candidate Loan	1,000
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	1,000



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance
RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 20 AM 11:09

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 1, 2020 Ending Date: December 31, 2020
TOWN OF ANDOVER, MASS

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

Roland Kim
Candidate Full Name (if applicable)
Board of Selectman
Office Sought and District
98 Burnham Road, Andover, MA 01810
Residential Address
E-mail: _____
Phone # (optional): _____

Committee to Elect Roland Kim
Committee Name
Douglas Corbett
Name of Committee Treasurer
98 Burnham Road, Andover, MA 01810
Committee Mailing Address
E-mail: _____
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	86.84
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	86.84
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	86.84
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:	Century Bank (Andover MA)

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: Douglas Corbett (Treasurer's signature) Date: Jan 18, 2021

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

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

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

Signed under the penalties of perjury: Roland Kim (Candidate's signature) Date: 1/19/21

SCHEDULE A: RECEIPTS

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

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

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

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

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				

* 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 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)	
Line 14: TOTAL EXPENDITURES IN THE PERIOD	

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
			Line 15: In-Kind Contributions over \$50 (or listed above)	
			Line 16: In-Kind Contributions \$50 & under (not listed above)	
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	

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

SCHEDULE D: LIABILITIES

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

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



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 20 AM 10:09

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/2020 Ending Date: 12/31/2020 ANDOVER, MASS

Type of Report: (Check one)

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

Daniel Arrigg Koh
Candidate Full Name (if applicable)

Andover Select Board
Office Sought and District

21 Windemere Drive, Andover, MA 01810
Residential Address

E-mail: friendsofdankoh@gmail.com

Phone # (optional): 978-225-7455

Friends of Dan Koh
Committee Name

Amy Sennett
Name of Committee Treasurer

21 Windemere Drive, Andover, MA 01810
Committee Mailing Address

E-mail: friendsofdankoh@gmail.com

Phone # (optional): 978-225-7455

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$1,359.92
Line 2: Total receipts this period (page 3, line 11)	\$122,990.00
Line 3: Subtotal (line 1 plus line 2)	\$124,349.92
Line 4: Total expenditures this period (page 5, line 14)	\$5,499.52
Line 5: Ending Balance (line 3 minus line 4)	\$118,850.40
Line 6: Total in-kind contributions this period (page 6)	\$0
Line 7: Total (all) outstanding liabilities (page 7)	\$8,490.54
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: _____

(Treasurer's signature)

Date: 01/17/21

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: _____

(Candidate's signature)

Date: 01/17/21

SCHEDULE A: RECEIPTS

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	See appended.		
Line 9: Total Receipts over \$50 (or listed above)		\$122,990.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$122,990.00	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	See appended.		

Line 9: Total Receipts over \$50 (or listed above)	\$122,990.00
Line 10: Total Receipts \$50 and under* (not listed above)	\$0
Line 11: TOTAL RECEIPTS IN THE PERIOD	\$122,990.00

← 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.

Date	Amount	Donor First Name	Donor Last Name	Donor Address	Donor City	Donor State	Donor Zip Code	Occupation	Employer
11/7/2020	\$25.00	Gillam	Ahn	8 Welch Rd	Lexington	MA	02421	Not Employed	Not Employed
12/31/2020	\$25.00	Gillam	Ahn	8 Welch Road	Lexington	MA	02421	Not Employed	Not Employed
12/14/2020	\$1,000.00	Barbara	Anderson	910 M Street NW Unit 201	Washington	DC	20005	Management Consultant	Herren
12/31/2020	\$100.00	Laura	Arjona	1107 N Harrison Blvd	Boise	ID	83702	Executive	Blue Cross Idaho
12/23/2020	\$1,000.00	Christina	Bai	7 Wadsworth Ln	Wayland	MA	01778	Not Employed	Not Employed
12/29/2020	\$100.00	Kenneth	Bernard	3928 S America West Trl	Flagstaff	AZ	86005	Physician	Pinnacle Emergency Medical Group PLLC
12/28/2020	\$100.00	Raj	Bhangoo	12 Princeton Road	Wellesley	MA	02482	Sales	Gilbane Building Company
12/31/2020	\$1,000.00	Michael	Binette	3 Linebrook Road	Topsfield	MA	01983	Architect	The Architectural Team Inc.
12/31/2020	\$100.00	Linda	Blake	8 Spruce Circle	Andover	MA	01810	Not Employed	Not Employed
11/26/2020	\$100.00	Kerry	Brennan	57 Quail Street	West Roxbury	MA	02132	Headmaster	The Roxbury Latin School
12/31/2020	\$200.00	Andrew	Bye	9 Cazenove Street Unit 1	Boston	MA	02116	Corporate Development	Akamai
12/16/2020	\$50.00	Timothy	Bye	18 Cunnigham Road	Wellesley	MA	02481	Not Employed	Not Employed
12/17/2020	\$1,000.00	Geoffrey	Caraboolad	28 Hawthorn Road	Brookline	MA	02445	President	Metric Corporation
12/17/2020	\$1,000.00	Nancy	Caraboolad	28 Hawthorn Road	Brookline	MA	02445	Not Employed	Not Employed
12/14/2020	\$1,000.00	Beryl	Chan	1188 Centre St	Newton	MA	02459	Consultant	Morningside
12/14/2020	\$1,000.00	Gerald	Chan	1188 Centre St	Newton	MA	02459	Real Estate	Mark Development
12/16/2020	\$1,000.00	Damien	Chaviano	57 River Street #106	Wellesley	MA	02481	Executive Coach	Cordance
12/15/2020	\$250.00	Susanna	Choo	111 Iron Works Way	Wayne	PA	19087	Executive Coach	Cordance
12/23/2020	\$500.00	Yuchan	Chu	90 Quincy shore Drive 823	Quincy	MA	02171	Not Employed	Not Employed
12/22/2020	\$1,000.00	Daniel	Chun	805 Wincrest Place	Great Falls	VA	22066	Executive	Occam Solutions
12/22/2020	\$1,000.00	Jill Park	Chun	805 Wincrest Place	Great Falls	VA	22066	Realtor	TTR Sotheby's
12/30/2020	\$1,000.00	Grace	Chung	36 French Road	Greenwich	CT	06831	Not Employed	Not Employed
12/29/2020	\$500.00	William	Collis	48 Grotto Avenue	Providence	RI	02906	Entrepreneur	Genji
12/29/2020	\$100.00	Chris	Cummings	2249 Fairfax Dr.	Arlington	VA	22201	Manager	Curiosity Media Inc.
12/30/2020	\$1,000.00	Marla	Curtis	211 Ipswich Road	Boxford	MA	01921	Architect	Carlia Glanzer CurtisA.I.A.
12/26/2020	\$250.00	Charles	Daher	38 Crenshaw Lane	Andover	MA	01810	Auto Dealer	Self
12/22/2020	\$500.00	Jason	Degnan-Rojeski	35 Village Lane	Hanover	MA	02339	Consultant	The Boston Consulting Group
12/21/2020	\$500.00	Dino	DiFranzo	78 Prince Street	Boston	MA	02113	Independent Contractor	self employed
12/18/2020	\$1,000.00	Rosemary	Dodek	530 Atlantic Avenue Apt. 706	Boston	MA	02210	Attorney	Goodwin Procter LLP
12/31/2020	\$100.00	Steve	Duvel	8 Milton Road	Barrington	RI	02806	Division Leader	Gilbane
12/22/2020	\$1,000.00	Lorell	Edelberg	808 S Michigan Ave Apt 2803	Chicago	IL	60605	Consultant	Clarity
8/26/2020	\$100.00	Gordon	Edes	13 Derby Street	Concord	MA	01742	Historian	Boston Red Sox
11/2/2020	\$50.00	Gordon	Edes	4 Yawkey Way	Boston	MA	02215	Communications	Boston Red Sox
11/26/2020	\$50.00	Gordon	Edes	13 Derby St	Concord	MA	01742	Not Employed	Not Employed
12/31/2020	\$50.00	Gordon	Edes	4 Yawkey Way	Boston	MA	02215	Investor	VantEdge Partners
12/11/2020	\$1,000.00	Paul	Edgerley	119 Hyslop Road	Brookline	MA	02445	Real Estate Developer	Self
12/11/2020	\$1,000.00	Sandra	Edgerley	119 Hyslop Road	Brookline	MA	02445	Real Estate Developer	Self
12/30/2020	\$100.00	Lincoln	Edwards	1801 Larchmont Dr.	Austin	TX	78704	CEO	Houndstooth Capital
12/28/2020	\$1,000.00	Tom	Engel	20 Wimbledon circle	West Newton	MA	02465	Hotel Investments	T.R. Engel Group LLC
12/15/2020	\$100.00	Michael	Fiore	1107 Rutledge St	Madison	WI	53703	Physician	University of Wisconsin Medical Foundation
12/10/2020	\$1,000.00	Dan	Fireman	27 Appian Drive	Wellesley	MA	02481	Interior Designer	Radius Designs
12/10/2020	\$1,000.00	Penny	Fireman	27 Appian Drive	Wellesley	MA	02481	Interior Designer	Radius Designs
12/11/2020	\$500.00	Richard	Friedman	20 University Rd	CAMBRIDGE	MA	02138	CEA	Carpenter & Co
12/16/2020	\$250.00	David	Fubini	80 Sears Rd	Brookline	MA	02445-7428	Senior Lecturer	Harvard Business School
7/4/2020	\$25.00	Anne Marie	Gallant	21 Lincoln Circle	Andover	MA	01810	Not Employed	Not Employed

Date	Amount	Donor First Name	Donor Last Name	Donor Address	Donor City	Donor State	Donor Zip Code	Occupation	Employer
8/26/2020	\$25.00	Susan	Goetze	31 Golden Street	Haverhill	MA	01830	Independent Contractor	Self Employed
12/16/2020	\$1,000.00	Michael	Gordon	31 Catlin Road	Brookline	MA	02445	Investor	Self
12/29/2020	\$100.00	Andrew	Graff	300 Pier Four Boulevard Unit 4F	Boston	MA	02210	Advertising CEO	Allen & Gerritsen
12/22/2020	\$500.00	Karen	Greenstein	3 Skinner Lane	Lynnfield	MA	01940	Not Employed	Not Employed
12/22/2020	\$1,000.00	Randy	Greenstein	3 Skinner lane	Lynnfield	MA	01940	Owner	BNEG
12/30/2020	\$250.00	Adam	Grossman	34 Heath St	Brookline	MA	02445	Marketing	Red Sox
12/29/2020	\$25.00	Asha	Haji	Flat 1 18 Child's Street	London	MA	SW59RY	Vice President of People	Streetbees
12/22/2020	\$100.00	Michel	Hajjar	151 Park St.	West Roxbury	MA	02132	Director of Sales Integration	Siemens SPLM
12/17/2020	\$1,000.00	Brian	Halligan	221 Columbus Ave 800	Boston	MA	02116	CEO/Co-founder	HubSpot
12/30/2020	\$1,000.00	Maryrose	Hanks	500 Culler Avenue	Frederick	MD	21701	Not Employed	Not Employed
12/31/2020	\$360.00	Hoon	Heo	91 Green Hill Rd	Longmeadow	MA	01106	Director	Master Heo's Tae Kwon Do
12/14/2020	\$1,000.00	Soo	Hong	10832 Ashby Avenue	Los Angeles	CA	90064	Human Resources	National Veterinary Associates
12/31/2020	\$1,000.00	Jeffrey	Hsi	403 S. Sapodilla Ave.	West Palm Beach	FL	33401	Attorney	Wolf Greenfield & Sacks P.C.
12/17/2020	\$1,000.00	Chris	Hughes	511 Avenue of the Americas #129	New York	NY	10011	Co-Chair	Economic Security Project
12/17/2020	\$1,000.00	Robert	Hughes	28 Westwood Road	Wellesley	MA	02482	Real Estate	Mark Development LLC
12/10/2020	\$1,000.00	Robert	Hughes	1 Crest Road East	Rolling hills	CA	90274	Vice Chairman	Pafco
12/29/2020	\$500.00	Jiheee	Huh	8 Jennison Cir	Natick	MA	01760-1050	Executive	Gilbane
12/21/2020	\$500.00	Ryan	Hutchins	25 Seaview Avenue	Madison	CT	06443	Not Employed	Not Employed
11/26/2020	\$50.00	Marcia	Ishizuoka	25 SEAVIEW AVENUE	MADISON	CT	06443	Not Employed	Not Employed
12/15/2020	\$25.00	Marcia	Ishizuoka	146 Forest St.	Methuen	MA	01844-2304	Retired	Retired
12/16/2020	\$200.00	James	Jajuga	79 Puritan Lane	Swampscott	MA	01907	Not Employed	Not Employed
12/17/2020	\$1,000.00	Ralph	James	1 Franklin Street Unit 1912	Boston	MA	02110	Restaurateur	Coje Management Group
12/29/2020	\$500.00	Christopher	Jamison	2 Heritage Drive Suite 302	Quincy	MA	02171	Consulting	self
12/16/2020	\$200.00	Philip	Johnston	547 Washington St. B11	Pembroke	MA	02359	VP Security	BNEG
12/26/2020	\$1,000.00	Edward	Kane	42 Chauncy Street	Boston	MA	02211	Restaurateur	Big Night Entertainment
12/22/2020	\$1,000.00	Joseph	Kane	25 Channel Center St ph 106	Boston	MA	02210	Self	BNEG
12/22/2020	\$1,000.00	James	Keefe	43 Roslin Street	Dorchester Center	MA	02124	RE Developer	Trinity Financial Inc
12/22/2020	\$250.00	Tunde	Kehinde	6711 Village Park Drive	Greenbelt	MD	20770	Finance	Lidya
12/31/2020	\$1,000.00	John	Keith	118 Forbes Road	Milton	MA	02186	Real Estate Contractor	Keith Construction Inc.
12/22/2020	\$1,000.00	Amanda	Kennedy	380 Commonwealth Avenue #1	Boston	MA	02215	Not Employed	Not Employed
12/18/2020	\$1,000.00	Nora	Kennedy	481 East 7th Street APT 1	South Boston	MA	02127	Director	Suffolk
12/22/2020	\$1,000.00	Sam	Kennedy	380 Commonwealth Avenue #1	Boston	MA	02215	CEO	Boston Red Sox
12/18/2020	\$1,000.00	Ann	Klee	50 Liberty Drive #11L	Boston	MA	02210	Executive	Suffolk
12/31/2020	\$500.00	Young	Ko	540 W 28th 9D	New York	NY	10001	CSO	Ground Signal
12/17/2020	\$100.00	Mike	Koehler	23 MIDDLESEX AVE	READING	MA	01867-2529	Attorney	Keegan Werflin LLP
12/19/2020	\$1,000.00	Claudia	Koh	42 Lincoln Circle East	Andover	MA	01810	Physician	Arriegg Eye & Ear Associates
12/19/2020	\$1,000.00	Howard	Koh	42 Lincoln Circle East	Andover	MA	01810	Professor	Harvard T.H. Chan School of Public Health
12/28/2020	\$1,000.00	Katie	Koh	5 Iroquois Avenue	Andover	MA	01810	Physician	Massachusetts General Hospital
12/25/2020	\$1,000.00	Steven	Koh	135 Clarendon St., Apt 3H	Boston	MA	02116	Professor	Boston College Law School
12/9/2020	\$1,000.00	Daniel	Korff	32 Traveler St Unit 502	boston	MA	02118	Real Estate	Mark Development
12/9/2020	\$1,000.00	Robert	Korff	57 River St Ste 106	Wellesley Hills	MA	02481	Principal	Mark Development LLC
12/18/2020	\$50.00	Nancy	Kronenberg	152 Wolf Rock Road	Carlsle	MA	01741	Hand Weaver	Rosepath Weaving
12/23/2020	\$1,000.00	Mie Kyung	Lee	155 N. Riverview Dr. #107	Anaheim	CA	92808	Executive	CJ ENM America
12/17/2020	\$1,000.00	Paul	Lee	29 Bow Rd	Belmont	MA	02478	Not Employed	Not Employed

Date	Amount	Donor First Name	Donor Last Name	Donor Address	Donor City	Donor State	Donor Zip Code	Occupation	Employer
12/18/2020	\$1,000.00	William	Lee	366 Cartwright Road	Wellesley	MA	02482	Attorney	WillmerHale
12/28/2020	\$1,000.00	Mary L.	LeSaffre	33 Commonwealth Avenue	Boston	MA	02116	Not Employed	Not Employed
12/31/2020	\$25.00	Wingway	Leung	8 Powers Road	Andover	MA	01810	Not Employed	Not Employed
12/21/2020	\$1,000.00	Heather	Lieberman	24342 Bridle Trail Rd	Hidden Hills	CA	091302	Film	Self
12/17/2020	\$1,000.00	Lawrence	Lucchino	130 Cabot St	Chestnut Hill	MA	02467	Baseball Executive	Boston Red Sox
12/31/2020	\$1,000.00	James	Mackay	253 Chelsea st	East Boston	MA	02128	Owner	Mackay Construction
12/31/2020	\$25.00	Sean	Malone	890 East Broadway	Boston	MA	02127	Electrician	BHA
12/18/2020	\$1,000.00	Sikanyiselwe	Maqubela	251 Arkansas Street #2	California	CA	94107	Investor	Carte Verte Management
12/21/2020	\$1,000.00	Stephen	Matloff	511 S Lucerne Blvd	Los Angeles	CA	90020	Consultant	Self
12/17/2020	\$1,000.00	David	McGrath	David McGrath 78 Porter Road	Andover	MA	01810	Veterinarian	Self
12/16/2020	\$1,000.00	Richard	Menschel	660 Park Avenue	New York	NY	10065	Managing Director	Hoarce W. Goldsmith Foundation
12/20/2020	\$1,000.00	Aaron	Mitchell	6133 W 6th Street	Los Angeles	CA	90048	Director HR	Netflix
12/31/2020	\$200.00	Kelli	Moles	2127 W Fletcher st	Chicago	IL	60618	Consulting	McKinsey
12/18/2020	\$1,000.00	David	Mou	47 Seaverns Ave. #5	Boston	MA	02130	Chief Medical Officer	Valera Health
7/4/2020	\$100.00	Thomas	Mullen	111B Grew Avenue	Roslindale	MA	02131	Speech Pathologist	City of Boston
11/2/2020	\$50.00	Thomas	Mullen	111B Grew Avenue	Roslindale	MA	02131	Speech Pathologist	City of Boston
12/25/2020	\$100.00	Thomas	Mullen	111B Grew Avenue	Roslindale	MA	02131	Speech Pathologist	City of Boston
12/31/2020	\$100.00	Brendan	Mulryan	52 Stonehenge Road	Manhasset	NY	11030	Manager	Etsy Inc.
11/2/2020	\$5.00	Anil	Navkal	14 Rock O Dundee Rd	Andover	MA	01810	Community Activist	Andover Community
12/31/2020	\$500.00	Warren	Nelson	80 Bridge St	Bluffton	SC	29910	Not Employed	Not Employed
12/16/2020	\$1,000.00	Daniel	O'Connell	25 Luce Farm Road	Vineyard Haven	MA	02568	Not Employed	Not Employed
12/15/2020	\$100.00	James	O'Connell	780 Albany Street	Boston	MA	02118	Physician	Massachusetts General Hospital
12/25/2020	\$100.00	James	O'Connell	780 Albany Street	Boston	MA	02118	Physician	Boston Health Care for the Homeless Program
12/21/2020	\$1,000.00	Joseph	O'Donnell	776 Boylston St, W11B	Boston	MA	02199	Chairman	Beimont Capital
12/22/2020	\$500.00	Sean	O'Donovan	30 Warwick Street	Somerville	MA	02145	Attorney	Self
12/31/2020	\$250.00	Michael	O'Neil	39 Eagle Ridge	Lebanon	NH	03766	Sports Marketing	Ethos
12/21/2020	\$1,000.00	William	Paine	11 Prospect St	Winchester	MA	01890	Lawyer	WillmerHale
12/19/2020	\$1,000.00	Kee	Park	27 James Street #5	Brookline	MA	02446	Lecturer	Harvard Medical School
12/29/2020	\$1,000.00	Daniel	Passacantilli	328 Pond St	Jamaica plain	MA	02130	President	Blue Front Tech Group
12/18/2020	\$1,000.00	Lee	Pelton	2 Spruce Street	Boston	MA	02108	President	Emerson College
12/31/2020	\$500.00	Heidi	Peng	405 Waltham Street Suite 311	Lexington	MA	02421	Business Owner	Eastern International LLC
12/14/2020	\$1,000.00	Richard	Phelps	125 Coolidge Ave, #109	Watertown	MA	02472	Chairman	Phelps Industries
12/17/2020	\$150.00	Pipefitters Local #537 COPE Fund		40 Enterprise St., FL 4	Dorchester	MA	02125-1638		
12/15/2020	\$250.00	Patricia	Profeta	210 Highland Street	Dedham	MA	02026	Consultant	NorthBridge Group
12/29/2020	\$250.00	Patricia	Profeta	210 Highland Street	Dedham	MA	02026	Consultant	NorthBridge Group
12/31/2020	\$250.00	Bryan	Rafanelli	140 Shawmut Ave	Boston	MA	02118	Event Producer	Rafanelli Events
12/31/2020	\$250.00	Puja	Ramani	1828 Valparaiso Ave	Menlo Park	CA	94025	Not Employed	Not Employed
12/31/2020	\$250.00	Doug	Rauch	54 Wilde Road	Waban	MA	02468	Retail Consultant	Sprouts Markets
12/22/2020	\$500.00	Elyse	Ressler	25 Channel Center Street ph106	Boston	MA	02210	Not Employed	Not Employed
12/22/2020	\$1,000.00	Catherine	Reynolds	P.O. Box 9870	McLean	VA	22102-0870	Chairman and CEO	Cahterine B. Reynolds Foundation
12/22/2020	\$1,000.00	Eileen	Rhodes	93 Saint Botolph Street	boston	MA	02116	Admissions Officer	Harvard
11/2/2020	\$50.00	Jean	Riesman	PO Box 4208	Middletown	RI	02842	Strategy Specialist	Newport Health Equity Zone
12/10/2020	\$1,000.00	David	Roache	8 Prescott St	Melrose	MA	02176	Vice President	Mark Development LLC
12/11/2020	\$1,000.00	Jason	Robins	90 Waltham St.2	Boston	MA	02118	Executive	DraftKings Inc

Date	Amount	Donor First Name	Donor Last Name	Donor Address	Donor City	Donor State	Donor Zip Code	Occupation	Employer
12/11/2020	\$1,000.00	Jason	Robins	90 Waltham St 2	Boston	MA	02118	Executive	DraftKings Inc
12/29/2020	\$1,000.00	Shannon	Robins	12 Westerly Rd	Weston	MA	02493	Not Employed	Not Employed
12/15/2020	\$200.00	Doug	Rubin	226 Cochituate Road	Wayland	MA	01778	Consultant	Northwind Strategies
12/18/2020	\$1,000.00	Mark	Rubin	84 Bigelow Road	West Newton	MA	02465	Business Manager	Maric Inc.
12/18/2020	\$250.00	Tony	Saroufim	100 Westover St.	West Roxbury	MA	02132-1342	Retired	Retired
12/28/2020	\$1,000.00	Alexandra	Schuster	853 Broadway	New York	NY	10003	Real Estate	Wingate Healthcare
12/17/2020	\$1,000.00	Audrey	Schuster	100 Wells Avenue	Newton	MA	02459	Not Employed	Not Employed
12/17/2020	\$1,000.00	Carly	Schuster	35 Walker St Fl 2	New York	NY	10013	COO Marlo Laz	La Vie Bobo LLC
12/17/2020	\$1,000.00	Elaine	Schuster	63 Kendrick	Needham	MA	02494	Not Employed	Not Employed
12/26/2020	\$1,000.00	Elizabeth	Schuster	181 Warren Ave 3	Boston	MA	02116	Real Estate Investing	Wingate Companies
12/17/2020	\$1,000.00	Heidi	Schuster	53 Beacon St. 2	Boston	MA	02108	Not Employed	Not Employed
12/17/2020	\$1,000.00	Jessica	Schuster	53 Greene Street Apt #4	New York	NY	10013	Interior Design	Self
12/17/2020	\$1,000.00	Mark	Schuster	100 Wells Avenue	Newton	MA	02459	CEO	Wingate Companies
12/29/2020	\$1,000.00	Scott	Schuster	63 Kendrick Street	Needham	MA	02494	CEO	Wingate Healthcare
12/27/2020	\$1,000.00	Nikki	Schuster O'Brien	48 Abbott Road	Wellesley	MA	02481	Real Estate	Wingate
12/31/2020	\$1,000.00	Jeremy	Sclar	305 Dudley Street	Brookline	MA	02445	Real estate	Self
12/31/2020	\$1,000.00	Dina	Selkoe	400 Stuart street 19D	Boston	MA	02116-5011	Not Employed	Not Employed
12/29/2020	\$1,000.00	Greg	Selkoe	1182 N Sunset Hills Rd	West Hollywood	CA	90069	Gaming	XSET LLC
12/19/2020	\$1,000.00	Amy	Sennett	21 Windemere Drive	Andover	MA	01810	Associate General Counsel	Open Text
12/31/2020	\$1,000.00	John	Sennett	1206 East Fox Lane	Fox Point	WI	53217	Investment Adviser	Sennett Investment Counseling
12/30/2020	\$1,000.00	Nancy	Sennett	1206 East Fox Lane	Fox Point	WI	53217	Not Employed	Not Employed
12/15/2020	\$1,000.00	Jill	Shah	292 Marlborough Street	Boston	MA	02116	President	Shah Family Foundation
12/15/2020	\$1,000.00	Niraj	Shah	292 Marlborough Street	Boston	MA	02116	Retail	Wayfair
12/20/2020	\$1,000.00	Michael	Sheehan	318 Prospect Street	Norwell	MA	02061	Not Employed	Not Employed
12/31/2020	\$1,000.00	Hon Kit	Shing	3172 N Rainbow Blvd	Las Vegas	NV	89108	CEO	Cottonwood Group
12/31/2020	\$100.00	Sam	Sianissian	5 Lu Stubbs Lane	Sharon	MA	02067	Analyst	Intex Solutions
12/17/2020	\$1,000.00	Hakan	Sjoo	460 Massachusetts Ave	Boston	MA	02118	Not Employed	Not Employed
12/15/2020	\$100.00	Jennifer	Smith	142 Hidden Road	Andover	MA	01810	VP	American Graphics Institute
12/25/2020	\$25.00	Lisa	Solomon	4 Belle Haven Dr	Andover	MA	01810	Psychologist	MGPO
12/28/2020	\$1,000.00	Alan	Solomont	60 Beaver Rd.	Weston	MA	02493	Dean	Tufts University
12/29/2020	\$1,000.00	Zirui	Song	5 Iroquois Avenue	Andover	MA	01810	Faculty	Harvard Medical School
12/30/2020	\$100.00	Libbie	Thacker	2320 Howard	San Carlos	CA	94070	Self employed	Self
12/15/2020	\$1,000.00	Corey	Thomas	27 Cheswick Rd	Auburndale	MA	02466	Tech	Rapid7
7/4/2020	\$100.00	Sidney	Topol	33 Commonwealth Ave	Boston	MA	02116	Not Employed	Not Employed
12/31/2020	\$250.00	Amy	Vender	33 Hammock Rd	Clinton	CT	06413	Consultant	McKinsey
12/31/2020	\$500.00	Brian	Vickery	4 The Mews	Simsbury	CT	06070	Health services	Virtudent
12/19/2020	\$200.00	John	Voith	50 Wall St	Wellesley	MA	02481	Banker	Amalgamated Bank
12/31/2020	\$500.00	Mark	Walsh	140 Shawmut Avenue 8B	Boston	MA	02118	Mayor	City of Boston
12/16/2020	\$1,000.00	Martin	Walsh	2 Butler St	Dorchester	MA	02124	Founder	BLOCK
12/9/2020	\$1,000.00	Koda	Wang	400 15th Street, Apt. 2C	Brooklyn	NY	11215	Developer	Weiner Ventures
12/11/2020	\$1,000.00	Adam	Weiner	101 Fernwood Road	Brookline	MA	02467	Attorney	Barry Weiner Strategies
12/31/2020	\$500.00	Barry	Weiner	3A Curlew Court	Gloucester	MA	01930	Not Employed	Not Employed
12/11/2020	\$1,000.00	Rita	Weiner	1010 Fernwood Road	Chestnut Hill	MA	02467	Not Employed	Not Employed
12/29/2020	\$1,000.00	Roberta	Weiner	33 Boylston St., Ste 3000	Chestnut Hill	MA	02467	Not Employed	Not Employed

Date	Amount	Donor First Name	Donor Last Name	Donor Address	Donor City	Donor State	Donor Zip Code	Occupation	Employer
12/29/2020	\$1,000.00	Stephen	Weiner	33 Boylston St., Ste 3000	Chestnut Hill	MA	02467	Founder	SR Weiner and Associates
12/17/2020	\$250.00	Mitchell	Weiss	Morgan Hall T67	Boston	MA	02163	Professor	Harvard University
12/31/2020	\$1,000.00	Hannah Chun	Welsh	80 Main Circle	Shrewsbury	MA	01545	Business	International Industries Inc.
12/19/2020	\$1,000.00	Thomas	Werner	770 Napoli drive	Pacific Palisades	CA	90272	Executive	Carsey Werner
12/31/2020	\$500.00	Barbara	Why	2657 Birchtree Lane	Santa Clara	CA	95051	Not Employed	Not Employed
12/31/2020	\$1,000.00	Geoffrey	Why	127 Barnard Ave	Watertown	MA	02472	Lawyer	Verrill Dana LLP
12/31/2020	\$500.00	Leverett	Wing	38 County Road	Chelsea	MA	02150	Exec. Dir.	Commonwealth Seminar
12/31/2020	\$200.00	Gilbert	Winn	5 Byron Street	Boston	MA	02108	Real Estate	Winnco
12/21/2020	\$1,000.00	Salle	Yoo	4104 24th Street # 8115	San Francisco	CA	94114	Not Employed	Not Employed
12/22/2020	\$250.00	Stephen M	Zappala	98 Rattlesnake Hill Road	Andover	MA	01810	Physician	Lahey Hospital & Medical Center
12/15/2020	\$1,000.00	Peter	Zhu	38 Haskell St	Allston	MA	02134	Investment Partner	Self

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
	See appended.			
Line 12: Total Expenditures over \$50 (or listed above)				\$5,499.52
Line 13: Total Expenditures \$50 and under* (not listed above)				\$0
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$5,499.52

* 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	See appended.			
Line 12: Expenditures over \$50 (or listed above)				\$5,499.52
Line 13: Expenditures \$50 and under* (not listed above)				\$0
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$5,499.52

Enter on page 1, line 4 →

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

Date Paid	To Whom Paid	Address	Purpose of Expenditure	Amount
7/5/2020	ActBlue	366 Summer Street, Somerville, MA 02144	ActBlue Fees	\$8.89
8/30/2020	ActBlue	366 Summer Street, Somerville, MA 02144	ActBlue Fees	\$4.94
11/3/2020	ActBlue	366 Summer Street, Somerville, MA 02144	ActBlue Fees	\$6.14
11/8/2020	ActBlue	366 Summer Street, Somerville, MA 02144	ActBlue Fees	\$0.99
11/29/2020	ActBlue	366 Summer Street, Somerville, MA 02144	ActBlue Fees	\$7.91
12/13/2020	ActBlue	366 Summer Street, Somerville, MA 02144	ActBlue Fees	\$572.75
12/20/2020	ActBlue	366 Summer Street, Somerville, MA 02144	ActBlue Fees	\$1,584.97
12/27/2020	ActBlue	366 Summer Street, Somerville, MA 02144	ActBlue Fees	\$1,000.35
12/31/2020	ActBlue	366 Summer Street, Somerville, MA 02144	ActBlue Fees	\$1,252.60
1/21/20	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$90.30
2/19/20	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$90.30
3/19/20	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$90.30
4/20/20	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$90.30
5/19/20	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$90.30
6/19/20	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$60.30
7/20/20	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$90.30
8/19/20	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$90.30
9/21/20	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$90.30
10/19/20	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$90.30
11/19/20	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$93.49
12/21/20	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$93.49

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
None.	None.	None.	None.	None.
Line 15: In-Kind Contributions over \$50 (or listed above)				\$0
Line 16: In-Kind Contributions \$50 & under (not listed above)				\$0
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				\$0

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer. Page 6

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
	See appended.			
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	\$8,490.54

Date Incurred	To Whom Due	Address	Purpose	Amount
12/18/18	Daniel Arrigg Koh	21 Windemere Drive, Andover, MA 01810	MailChimp	\$138.13
12/6/19	Daniel Arrigg Koh	21 Windemere Drive, Andover MA 01810	Supporter Cards	\$2,920.40
12/23/19	Daniel Arrigg Koh	21 Windemere Drive, Andover MA 01810	Telephone Services	\$99.50
12/28/19	Daniel Arrigg Koh	21 Windemere Drive, Andover, MA 01810	VoteBuilder	\$700.00
11/8/20	Daniel Arrigg Koh	21 Windemere Drive, Andover, MA 01810	Telephone Services	\$111.71
12/11/20	Daniel Arrigg Koh	21 Windemere Drive, Andover, MA 01810	Supporter Cards	\$3,520.80
12/11/20	Jason Robins	90 Waltham St 2, Boston, MA, 02118	Donation Reimbursement	\$1,000.00



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 13 PM 12:13

File with: City or Town Clerk or Election Commission
TOWN OF ANDOVER, MASS

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

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

Candidate Full Name (if applicable)

Office Sought and District

Residential Address
Telephone Number (optional):

Committee Name

Name of Committee Treasurer

Committee Mailing Address
Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<input type="text" value="5,168.42"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="0"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="5,168.42"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="0"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="5,168.42"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text" value="0"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text" value="0"/>
Line 8: Name of bank(s) used:	<input type="text" value="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: (Treasurer's signature) Date:

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



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 15 PM 12:59

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Jan 1, 2020 Ending Date: TOWN OF ANDOVER, MASS DEC 31, 2020

Type of Report: (Check one)

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

Brian P. Major
Candidate Full Name (if applicable)
Selectman
Office Sought and District
11 Odyssey Way, Andover, MA 01810
Residential Address
E-mail: _____
Phone # (optional): _____

Major Committee
Committee Name
Elizabeth Bigelow
Name of Committee Treasurer
10 Wabanaki Way Andover, MA 01810
Committee Mailing Address
E-mail: exbigelow@aol.com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>2956.15</u>
Line 2: Total receipts this period (page 3, line 11)	<u>.05</u>
Line 3: Subtotal (line 1 plus line 2)	<u>2956.20</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>- 0 -</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>2956.20</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>Merrimack Valley Federal Credit Union</u>

Affidavit of Committee Treasurer:

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

Signed under the penalties of perjury: Elizabeth Bigelow (Treasurer's signature) Date: 1/7/2021

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 1/24/2021

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 15 AM 11:30

TOWN OF ANDOVER, MASS

SCHEDULE A: RECEIPTS

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
11/30/2020	Merrimack Valley Federal Credit Union	.05	Interest Paid
Line 9: Total Receipts over \$50 (or listed above)		- 0 -	
Line 10: Total Receipts \$50 and under* (not listed above)		- 0 -	
Line 11: TOTAL RECEIPTS IN THE PERIOD		.05	← 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

Line 12: Total Expenditures over \$50 (or listed above)	
Line 13: Total Expenditures \$50 and under* (not listed above)	
Line 14: TOTAL EXPENDITURES IN THE PERIOD	- 0 -

Enter on page 1, line 4 →

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

SCHEDULE 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)	
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	- 0 -

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

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 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)				
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				- 0 -

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



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

RECEIVED
TOWN CLERK'S OFFICE
Office of Campaign and Political Finance

2021 JAN 15 PM 12:59

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2020 Ending Date: ANDOVER 1/31/2020

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

Susan McCready
Candidate Full Name (if applicable)

School Committee
Office Sought and District

8 Dean Circle, Andover MA 01810
Residential Address

Telephone Number (optional): 978-623-9993

Committee to elect Susan McCready
Committee Name

Gina Murray
Name of Committee Treasurer

3 Wescott Road, Andover MA 01810
Committee Mailing Address

Telephone Number (optional): 978-474-9344

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$ 1,511.51
Line 2: Total receipts this period (page 3, line 11)	- 0 -
Line 3: Subtotal (line 1 plus line 2)	\$ 1,511.51
Line 4: Total expenditures this period (page 5, line 14)	- 0 -
Line 5: Ending Balance (line 3 minus line 4)	\$ 1,511.51
Line 6: Total in-kind contributions this period (page 6)	- 0 -
Line 7: Total (all) outstanding liabilities (page 7)	\$ 5,049.12
Line 8: Name of bank(s) used:	DCU

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

Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 1/6/21

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

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

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

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 1/13/21

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 15 PM 12:09

TOWN OF ANDOVER, MASS

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)
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.

Committee to elect Susan McCready for SC

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)

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

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

Committee to elect Susan McCready for SC

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)	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD	

* 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
			Line 15: In-Kind Contributions over \$50 (or listed above)	
			Line 16: In-Kind Contributions \$50 & under (not listed above)	
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	

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

Committee to elect Susan McCreddy for SC

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
2/14/15	Susan McCready	8 Dean Circle Andover, MA 01810	2015 Campaign signs	\$ 929.69
2/14/15	Susan McCready	8 Dean Circle Andover, MA 01810	Loan to campaign to open Bank acct	\$ 100.00
3/13/15	Susan McCready	8 Dean Circle Andover, MA 01810	Stamp costs (remaining from 2015 campaign)	\$ 326.64
1/29/18	Susan McCready	8 Dean Circle Andover, MA 01810	2018 signs & Campaign stakes	\$ 999.43
3/1/18	Susan McCready	8 Dean Circle Andover, MA 01810	6x9 postcard mailing	\$ 417.55
3/2/18	Susan McCready	8 Dean Circle Andover, MA 01810	postage for 6x9 postcard mailing	\$ 2,001.75
3/4/18	Susan McCready	8 Dean Circle Andover, MA 01810	4x6 Friends to Friend Cards	\$ 239.06
3/6/18	Susan McCready	8 Dean Circle Andover, MA 01810	Postage expenses	\$ 35.00

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)** \$ 5,049.12

Committee to elect Susan McCready for SC



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2025 DEC 21 PM 3:03

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: _____ Ending Date: TOWN OF ANDOVER MASS Dec 31, 2020

Type of Report: (Check one)

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

MARGARET O'CONNOR
Candidate Full Name (if applicable)

BOARD MEMBER Andover Housing Authority
Office Sought and District

22 Railroad St (#203) Andover
Residential Address

E-mail: Margaret.O'Connor@removes.com

Phone # (optional): 978-475-5993

~~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:

N/A

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:

N/A

(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: Dec 20, 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)
Line 9: Total Receipts over \$50 (or listed above)		0	
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		0	← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

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

(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

Line 12: Total Expenditures over \$50 (or listed above)

Line 13: Total Expenditures \$50 and under* (not listed above)

Enter on page 1, line 4 →

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

* 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

Line 15: In-Kind Contributions over \$50 (or listed above) 0

Line 16: In-Kind Contributions \$50 & under (not listed above) 0

Enter on page 1, line 6 → **Line 17: TOTAL IN-KIND CONTRIBUTIONS** 0

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



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 21 AM 8:50

TOWN OF ANDOVER, MASS

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-2020 Ending Date: 12-31-2020

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

<u>MARY T. O'DONOGHUE</u> Candidate Full Name (if applicable)	_____ Committee Name
<u>69 SALEM ST., ANDOVER, MA 01810</u> Office Sought and District	_____ Name of Committee Treasurer
<u>69 SALEM ST., ANDOVER, MA 01810</u> Residential Address	_____ Committee Mailing Address
Telephone Number (optional): <u>978-337-8159</u>	Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>1779.14</u>
Line 2: Total receipts this period (page 3, line 11)	<u>—</u>
Line 3: Subtotal (line 1 plus line 2)	<u>1779.14</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>60.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>1719.14</u>
Line 6: Total in-kind contributions this period (page 6)	<u>—</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>2,542.00</u>
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: _____

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

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

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

Signed under the penalties of perjury: MARY T. O'DONOGHUE (Candidate's signature) Date: 1-20-2021

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
			Line 12: Expenditures over \$50 (or listed above)	60.00
			Line 13: Expenditures \$50 and under* (not listed above)	—
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	60.00

* 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
3-26-17	BW GRAPICS	790 TURNPIKE ST., N. ANDOVER MA. 01845	MAILING	\$ 2,542
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	\$ 2,542

FEB 01 2021

RECEIVED
TOWN CLERK'S OFFICE



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report 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: 1/1/2020 Ending Date: 12/31/2020

Type of Report: (Check one)

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

Steven R. Pekock
Candidate Full Name (if applicable)

Trustee Punchard Free School
Office Sought and District

109 Chestnut St, Andover, MA 01810
Residential Address

E-mail: _____

Phone # (optional): (978) 496-8429

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: <u>NA</u>	

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

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

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

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

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

Signed under the penalties of perjury: _____ (Candidate's signature) Date: 1/20/2021

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)				
Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITURES IN THE PERIOD			

* 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 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN -5 AM 11:44
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 6/29/2020 Ending Date: 1/4/2021
TOWN OF ANDOVER, MASS

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

Stephen Prochurak
Candidate Full Name (if applicable)
Select Board Andover MA 01810
Office Sought and District
16 B Gardner Ave Lowell, MA 01854
Residential Address
Telephone Number (optional): 978-416-1833

Committee to Elect Stephen Prochurak
Committee Name
Jane Giuffe
Name of Committee Treasurer
9 Cottage Heights Rd Andover MA 01810
Committee Mailing Address
Telephone Number (optional): 978-475-2669

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>212.02</u>
Line 2: Total receipts this period (page 3, line 11)	<u>-0-</u>
Line 3: Subtotal (line 1 plus line 2)	<u>212.02</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>212.02</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>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: [Signature] (Treasurer's signature) Date: 1/4/2021

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)
 Candidate with Committee and no activity independent of the committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.
Candidate without Committee OR Candidate with independent activity filing separate report
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 1/4/2021

SCHEDULE B: EXPENDITURES

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

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
12/1/2000	Veterans Northwest District	10 Road Street Haverhill, Ma 01832	Donation to close account -	212.02
Line 12: Total Expenditures over \$50 (or listed above)				212.02
Line 13: Total Expenditures \$50 and under* (not listed above)				-0-
Line 14: TOTAL EXPENDITURES IN THE PERIOD				212.02

Enter on page 1, line 4 →

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



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

Revised
2021 JAN -5 AM 11:44

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 5/24/2020 Ending Date: 1/4/2021 TOWN OF ANDOVER, MASS

Type of Report: (Check one) *Revised*
 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 Rd Andover MA
Residential Address
Telephone Number (optional): 978-416-1233

Committee to Elect Stephen Prochniak
Committee Name
Jane Gifun
Name of Committee Treasurer
9 Castle Heights Rd Andover MA
Committee Mailing Address
Telephone Number (optional): 978-475-8669

sprochn5@gmail.com

Flacey.gad@andover.ma.us

SUMMARY BALANCE INFORMATION

Line 1: Ending Balance from previous report	<u>212.58</u>
Line 2: Total receipts this period (page 3, line 11)	<u>-0-</u>
Line 3: Subtotal (line 1 plus line 2)	<u>212.58</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>-0.56</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>212.02</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>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: Jane Gifun (Treasurer's signature) Date: 1/4/2021

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

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

Candidate without Committee OR Candidate with independent activity filing separate report
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: Stephen Prochniak (Candidate's signature) Date: 1/4/2021

SCHEDULE B: EXPENDITURES

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

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	adjustment		recording error	- .56
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				- .56

Enter on page 1, line 4 →

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



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance **RECEIVED**
TOWN CLERK'S OFFICE

2021 JAN 20 PM 12:10
File with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/2020 Ending Date: 12/31/2020
TOWN OF ANDOVER, MASS

Type of Report: (Check one)

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

Keith M. Saxon
Candidate Full Name (if applicable)

Moderator, Town of Andover
Office Sought and District

15 Wethersfield Drive, Andover MA 01810
Residential Address

E-mail: ksaxon@aol.com

Phone # (optional): 781-454-5330

Committee to Elect Keith Saxon Moderator
Committee Name

Krystal Solimine
Name of Committee Treasurer

15 Wethersfield Drive, Andover MA 01810
Committee Mailing Address

E-mail: krystalsolimine@verizon.net

Phone # (optional): 978-265-7242

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	100.49
Line 2: Total receipts this period (page 3, line 11)	100.49
Line 3: Subtotal (line 1 plus line 2)	200.98
Line 4: Total expenditures this period (page 5, line 14)	25.00
Line 5: Ending Balance (line 3 minus line 4)	75.49
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:	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: Krystal Solimine (Treasurer's signature) Date: 1/19/2021

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: Keith M. Saxon (Candidate's signature) Date: 1/19/2021

SCHEDULE A: RECEIPTS

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
12/31/2020	Keith Saxon 15 Wethersfield Drive Andover MA 01810	100.49	
Line 9: Total Receipts over \$50 (or listed above)		100.49	
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		100.49	← Enter on page 1, line 2

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



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 1, 2020 Ending Date: December 31, 2020

TOWN OF ANDOVER, MASS

Type of Report: (Check one)

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

Shannon Scully
Candidate Full Name (if applicable)

School Committee, Town of Andover
Office Sought and District

34 School Street, Andover, MA 01810
Residential Address

E-mail: shannon@hembrough.com

Phone # (optional): _____

Scully for Andover
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)	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: Sara A. W. Blais (Treasurer's signature) Date: 1/3/21

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 5 Jan 21

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 15 AM 11:30

TOWN OF ANDOVER, MASS



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 20 AM 10:09
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2020 Ending Date: 12/31/2020
TOWN OF ANDOVER, MASS

Type of Report: (Check one)

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

Tracey E. Spruce
Candidate Full Name (if applicable)

Town of Andover School Committee
Office Sought and District

23 Woodhaven Drive, Andover, MA 01810
Residential Address

E-mail: sprucelo@gmail.com

Phone # (optional): 978-475-6802

Committee to Elect Tracey Spruce
Committee Name

Vanessa Weisman
Name of Committee Treasurer

9 Coventry Lane, Andover, MA 01810
Committee Mailing Address

E-mail: vanebewe@gmail.com

Phone # (optional): 917-693-6914

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	\$100
Line 3: Subtotal (line 1 plus line 2)	\$100
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	\$100
Line 6: Total in-kind contributions this period (page 6)	\$102
Line 7: Total (all) outstanding liabilities (page 7)	0
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: Vanessa Weisman (Treasurer's signature) Date: 1/7/2021

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

Candidate with Committee and no activity independent of the committee

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

Candidate without Committee OR Candidate with independent activity filing separate report

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

Signed under the penalties of perjury: Tracey Spruce (Candidate's signature) Date: 1/20/21

SCHEDULE A: RECEIPTS

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
12/16/2020	Amy Serino 26 Stoneybrook Circle Andover, MA 01810	\$100	
Line 9: Total Receipts over \$50 (or listed above)		\$100	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$100	← 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)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES (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)	
			Line 14: TOTAL EXPENDITURES IN THE PERIOD	

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 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
12/4/2020	Tracey Spruce	23 Woodhaven Drive Andover, MA 01810	Paid for Wordpress (domain/website)	\$102
Line 15: In-Kind Contributions over \$50 (or listed above)				\$102
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				\$102

* 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.



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
FILED
2021 JAN 26 PM 2:29

Fill in Reporting Period dates: Beginning Date: 1/1/20 Ending Date: 1/1/21

Type of Report: (Check one)

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

Eric Stabenhaus
Candidate Full Name (if applicable)

Punchard School Board of Trustees
Office Sought and District

8 Enfield Dr., Andover, MA 01810
Residential Address

Telephone Number (optional): (978) 886-1315

N/A
Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (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>N/A</u>

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

Signed under the penalties of perjury: [Signature] (Treasurer's signature) Date: 1/25/21

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

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

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

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 1/25/21



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

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE
JUN 26 PM 2:29

File with: City / Town Clerk or Election Commission

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

CANDIDATE: Full Name: ERIC STUBENHAUS
 Residential Address: 8 ENFIELD DR
 City / State / Zip: ANDOVER, MA 01810
 E-Mail Address: estubenhau@comcast.com Phone #: (978) 886-1315
 Party Affiliation: indep. (If applicable)

OFFICE SOUGHT/PURPOSE:
 Title: Board of Trustees of Punchard School
 District: _____

COMMITTEE: Name of Committee: N/A
 (The name of the committee must include the candidate's last name)
 Committee Mailing Address: _____
 City / State / Zip: _____ Phone #: _____

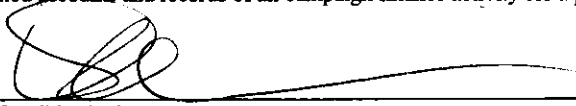
OFFICERS:

<p>Chairman: _____ Residential Address: <u>N/A</u> City / State / Zip: _____ Phone #: _____</p>	<p>Treasurer*: _____ Residential Address: _____ City / State / Zip: _____ Phone #: _____</p> <p><small>*A public employee may not serve as treasurer of any political committee (see reverse).</small></p>
<p>Other Officer/Title: _____ Residential Address: _____ City / State / Zip: _____ Phone #: _____</p>	<p>Other Officer/Title: _____ Residential Address: _____ City / State / Zip: _____ Phone #: _____</p>

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

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

SIGNED UNDER THE PENALTIES OF PERJURY:


 Candidate's signature Date: 7/25/21

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

SIGNED UNDER THE PENALTIES OF PERJURY:

 Treasurer's signature Date: _____

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

SIGNED UNDER THE PENALTIES OF PERJURY:

 Chairman's signature Date: _____



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 19 PM 1:14:3

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2020 Ending Date: 12/31/2021

TOWN OF ANDOVER, MASS

Type of Report: (Check one)

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

Ted Teichert
Candidate Full Name (if applicable)

School Committee
Office Sought and District

44 Linwood St Andover MA
Residential Address

E-mail: tteichert@comcast.net

Phone # (optional): 978-886-7323

Committee to Elect Ted Teichert
Committee Name

Jacqueline Branscombe
Name of Committee Treasurer

39 Linwood St Andover MA
Committee Mailing Address

E-mail: branscombefamily@comcast.net

Phone # (optional): 617-633-3496

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	2,067.25
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)	2,067.25
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>Santander</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: Jacqueline Branscombe (Treasurer's signature) Date: 1/16/2021

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

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

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

Signed under the penalties of perjury: Chris Teichert (Candidate's signature) Date: 1/19/21



Commonwealth
of Massachusetts

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

RECEIVED
TOWN CLERK'S OFFICE
2021 JAN 11 PM 5:02

CPF ID# 15452

TOWN OF ANDOVER, MASS

File with: Director
Office of Campaign and Political Finance
One Ashburton Place Rm. 411
Boston, MA 02108
(617) 979-9300

Reporting Period: Beginning: 1/1/2020 Ending: 12/31/2020

Type of Report: 2020 Year-end Report

Vispoli, Alex
Full Name of Candidate
Municipal, Local Filer
Office Sought/ District
7 Alison Way
Andover, MA 01810
Residential Address

Vispoli Committee
Committee Name
Michael Harvey
Name of Committee Treasurer
PO Box 55
Andover, MA 01810
Committee Address

SUMMARY BALANCE INFORMATION

Ending balance from previous report:	\$6,884.57
Total receipts this period:	\$0.00
Subtotal:	\$6,884.57
Total expenditures this period:	\$0.00
Ending Balance:	\$6,884.57
<hr/>	
Total inkind contributions this period:	\$0.00
Total out of pocket spending this period:	\$0.00
Total outstanding liabilities:	\$14,822.52
Name of Bank Used:	Northmark 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, 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:

Treasurer's signature (in ink)

Date

01/11/2021

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:

Candidate's signature (in ink)

Date

1/11/2021

Schedule D: Liabilities

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

<u>Date To Whom Due</u>	<u>Reduction</u>	<u>Loan Amount</u>	<u>Purpose</u>
12/31/2019 Vispoli, Alex 7 Alison Way Andover, MA 01810		\$14,822.52	
Outstanding Liabilities:		<u>\$14,822.52</u>	

RECEIVED
TOWN CLERK'S OFFICE
2021 JAN 11 PM 5:02
TOWN OF ANDOVER, MASS

RECEIVED
TOWN CLERK'S OFFICE

2021 JAN 29 AM 8:49



Form CPF M 102: Campaign Finance Report

Municipal Form

TOWN OF ANDOVER, MASS

Office of Campaign and Political Finance

Reporting Period (date)	Reporting Period (month)	Reporting Period (year)	Reporting Period (day)	Reporting Period (month)	Reporting Period (year)
Name of Report (Candidate)					
<input type="checkbox"/> Study Period (preparation) <input type="checkbox"/> Study Period (election) <input checked="" type="checkbox"/> Study Period (election)					
Candidate Name: _____ Candidate Address: _____ Candidate City: _____ Candidate State: _____ Candidate Zip: _____ Candidate Phone: _____					

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous period	0
Line 2: Total receipts this period (page 3, line 17)	0
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 3, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total out-of-pocket contributions (page 6)	0
Line 8: Name of banks used	

Approval of Committee Treasurer

I, _____, Treasurer of the Campaign Committee, certify that the above information is true and correct to the best of my knowledge and belief, and that the committee has received all contributions and expenditures reported hereon.

Signed under the penalty of perjury

[Signature]

Date: 1/25/2021

FOR CANDIDATE TRINGS ONLY: Approval of Candidate (check if Candidate)

Candidate with Committee

I, _____, Candidate, certify that the above information is true and correct to the best of my knowledge and belief, and that the committee has received all contributions and expenditures reported hereon.

Candidate without Committee

I, _____, Candidate, certify that the above information is true and correct to the best of my knowledge and belief, and that the committee has received all contributions and expenditures reported hereon.

Signed under the penalty of perjury

[Signature]

Date: 1/28/2021

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Line 12: Expenditures over \$50 (for listed above)				
Line 13: Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD			0	

* Enter on page 1, line 1.

* If you have itemized expenditures of \$50 and under, include them on 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
Line 15: In-kind Contributions over \$50 (or listed above)				
Line 16: In-kind Contributions \$50 & under (not listed above)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				0

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

