

ALBUQUERQUE



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

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

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

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: jlabuquerque@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: jlabuquerque@yahoo.com
 Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	100.55
Line 2: Total receipts this period (page 3, line 11)	7.22
Line 3: Subtotal (line 1 plus line 2)	107.77
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	107.77
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: 1/5/22

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: 01/05/22

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

BLUMSTEIN



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ANDOVER TOWN CLERK
R01D 2027 JAN 18 PM3:06

File with: City or Town Clerk or Election Commission

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

Type of Report: (Check one)

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

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	<input type="text" value="0"/>
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="0"/>
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="0"/>
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="(none)"/>

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: 1/7/2022

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 1/13/2022

SCHEDULE A: RECEIPTS

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

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

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

ANDOVER TOWN CLERK
RCUD 2022 JAN 18 PM 105

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 2

SCHEDULE A: RECEIPTS (continued)

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

ANDOVER TOWN CLERK
 RCUD 2022 JAN 13 PM 1:07

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

2007 JAN 13 PM 1:07
 ER TOWN CLERK
 ROUN

* 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	
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 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

ANDOVER TOWN CLERK
SOLD 1022 JAN 13 PM '07

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.

CONOSCENTI



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ANDOVER TOWN CLERK
RCUD 2022 JAN 19 PM 2:52

File with: City or Town Clerk or Election Commission

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

Type of Report: (Check one)

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

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@gmail.com

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

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	38.72
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	38.72
Line 4: Total expenditures this period (page 5, line 14)	0
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: 1/16/22

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: Lauren Conoscenti (Candidate's signature) Date: 1/16/2022

SCHEDULE A: RECEIPTS

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

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

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

DANISCH
PUNCHARD

**DANISCH
SELECT BOARD**



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: December 22, 2021 Ending Date: December 31, 2021

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

Melissa M. Danisch
Candidate Full Name (if applicable)
Andover Select Board, Town of Andover
Office Sought and District
16 Bradley Road, Andover, MA 01810
Residential Address
E-mail: melissadanisch@comcast.net
Phone # (optional): _____

Melissa Danisch for Andover
Committee Name
Sara A.W. Blais
Name of Committee Treasurer
12 Coventry Lane, Andover, MA 01810
Committee Mailing Address
E-mail: salexiswalls@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)	1,439.98
Line 3: Subtotal (line 1 plus line 2)	1,439.98
Line 4: Total expenditures this period (page 5, line 14)	30.57
Line 5: Ending Balance (line 3 minus line 4)	1,409.41
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	<u>Citizens Bank</u>

Affidavit of Committee Treasurer:
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: Sara A.W. Blais (Treasurer's signature) Date: 12/31/21

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate (check 1 box only)
Candidate with Committee
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.
Candidate without Committee
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 12/31/2021

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)
12/22/21	Susan McCreedy 8 Dean Circle Andover, MA 01810	103.48	
12/28/21	Edward Morris 400 Lafayette Road Hampton, NH 03842	206.46	Lawyer, Self-Employed
12/23/21	Mary Joan Morris 11 Abbot Street Andover, MA 01810	501.00	Writer, Self-Employed
12/26/21	David Perkkio 1027 Overlook Road Mendota Hts, MN 55118	257.94	VP of Operations, Elder-Jones, Inc.
12/22/21	Matthew Scully 34 School Street Andover, MA 01810	100.00	
12/23/21	Sarah Starkweather 123 1/2 Main Street Andover, MA 01810	200.00	Community Relations Director, Forestdale Park Assisted Living
Line 9: Total Receipts over \$50 (or listed above)		1,368.88	
Line 10: Total Receipts \$50 and under* (not listed above)		71.10	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,439.98	← 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)				30.57
Line 14: TOTAL EXPENDITURES IN THE PERIOD				30.57

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. 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)				

DOHERTY



Commonwealth
of Massachusetts

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

ANDOVER TOWN CLERK
RCUD 2022 JAN 10 PM 12:41

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

CPF ID# 17434

Reporting Period: Beginning: 6/29/2021 Ending: 12/31/2021

Type of Report: 2021 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:

James Doherty Date 1/4/22
Treasurer's signature (in ink)

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 Date 1/8/22
Candidate's signature (in ink)

GILBERT



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 1, 2021 Ending Date: December 31, 2021

Type of Report: (Check one)

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

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: anniegilbert@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: salexswells@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: 12/31/21

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: Jan 1, 2022

SCHEDULE A: RECEIPTS

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

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

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

GRAMS



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ANDOVER TOWN CLERK
RCUD 2022 JAN 18 AM 11:01

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 4/27/2021 Ending Date: 12/31/2021

Type of Report: (Check one)

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

Daniel T. Grams
Candidate Full Name (if applicable)

Andover Housing Authority
Office Sought and District

28 Corbett St. Andover, MA 01810
Residential Address

F-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

F-mail: joshua@dallal.org

Phone # (optional): 978-270-1919

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$1,742.45</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>\$1,742.45</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: 1/13/2022

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

Candidate with Committee

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

Candidate without Committee

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

Signed under the penalties of perjury: Daniel T. Grams (Candidate's signature) Date: 1/13/2022

SCHEDULE B: EXPENDITURES

ANDOVER TOWN CLERK
RCUD 2022 JAN 18 AM 11:01

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

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)	
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.

GREGORY



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 1, 2021 Ending Date: December 31, 2021

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

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: salexswells@gmail.com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	637.04
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	637.04
Line 4: Total expenditures this period (page 5, line 14)	138.00
Line 5: Ending Balance (line 3 minus line 4)	499.04
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: 12/31/21

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. 6, 2022

SCHEDULE A: RECEIPTS

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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
1/5/21 & 2/22/21	Wordpress, Inc.	60 29th Street #1343 San Francisco, CA 94110	campaign website	102.00
Line 12: Total Expenditures over \$50 (or listed above)				102.00
Line 13: Total Expenditures \$50 and under* (not listed above)				36.00
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				138.00

* 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 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.

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)	

HAFENSTEINER



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

date of 0 balance

date of last filing

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: [redacted] [redacted]

Type of Report: (Check one)

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

Candidate Full Name (if applicable): Ann Marie Halenstener

Office Sought and District: School Committee

Residential Address: 19 Kirkland Dr. Andover

E-mail: amh1722@gmail.com

Phone # (optional):

Committee Name: for school *check here*

Name of Committee Treasurer: Jacob Halenstener

Committee Mailing Address:

E-mail: jacob.halenstener@gmail.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	090.57
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)	390.57
Line 6: Total in-kind contributions this period (page 6)	390.57
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: 1/20/22

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.

[Signature]

(Candidate's signature)

Date: 1/20/22

HOWE



Commonwealth of Massachusetts

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

ANDOVER TOWN CLERK
RCVD 2022 JAN 14 PM 2:10

Please print or type all information, except signatures.

City or Town of: Andover

Reporting Period: Beginning: 03/24/2021 Ending: 12/31/2021

Type of Report: (Check One)
[] 8th day preceding preliminary/primary [] 8th day preceding election [] 30th day following election (town or special) [x] 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

- 1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

Table with 5 columns: DATE, PRINT NAME, SIGNATURE, RESIDENTIAL ADDRESS (Street and Number), OFFICE SOUGHT. Row 1: 1/10/2022, Richard T. Howe, Richard J. Howe, 3 Robzndy Rd., Select Board Member

HUNTRESS



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Apr 13, 2021 Ending Date: Dec 31, 2021

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

E-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

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	610.1
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	610.1
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	610.1
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 20, 2022

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: Jan 20, 2022

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)				
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

KIM



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ANDOVER TOWN CLERK
RCUD 2022 JAN 19 PM 1:44

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 1, 2021 Ending Date: December 31, 2021

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

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: 1/19/22

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: 1/19/22

SCHEDULE A: RECEIPTS

M.G.I. 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.

KOH



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ANDOVER TOWN CLERK
ROUD 2022 JAN 18 PM 12:45

File with: City or Town Clerk or Election Commission

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

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

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="\$118,850.40"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="\$625.00"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="\$119,475.40"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="\$10,747.12"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="\$108,728.28"/>
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="\$112.29"/>
Line 8: Name of bank(s) used:	<input type="text" value="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:

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

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

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

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

SCHEDULE A: RECEIPTS

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)		\$625.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$625.00	← 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
1/4/2021	\$25.00	Robert	French	5 Regis Road	Andover	MA	01810	Not Employed	Not Employed
1/1/2021	\$50.00	Thomas	Kennedy	6 Wintergreen Circle	Andover	MA	01810	Firefighter	Town of Andover
1/26/2021	\$500.00	David	Kim	5803 Madaket Rd.	Bethesda	MD	20816	CEO	The IAMBIC Group
1/1/2021	\$50.00	Bonnie	Zahorik	172 N Main St.	Andover	MA	01810	Not Employed	Not Employed

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)				\$10,747.12
Line 13: Total Expenditures \$50 and under* (not listed above)				\$0
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$10,747.12

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
1/10/2021	ActBlue	366 Summer Street, Somerville, MA 02144	ActBlue Fees	\$0.99
1/31/2021	ActBlue	366 Summer Street, Somerville, MA 02144	ActBlue Fees	\$19.75
1/3/21	ActBlue	366 Summer Street, Somerville, MA 02144	ActBlue Fees	\$3.96
2/8/21	Daniel Arrigg Koh	21 Windemere Drive, Andover, MA 01810	MailChimp	\$138.13
2/8/21	Daniel Arrigg Koh	21 Windemere Drive, Andover MA 01810	Supporter Cards	\$2,920.40
2/8/21	Daniel Arrigg Koh	21 Windemere Drive, Andover MA 01810	Telephone Services	\$99.50
2/8/21	Daniel Arrigg Koh	21 Windemere Drive, Andover, MA 01810	VoteBuilder	\$700.00
2/8/21	Daniel Arrigg Koh	21 Windemere Drive, Andover, MA 01810	Telephone Services	\$111.71
2/8/21	Daniel Arrigg Koh	21 Windemere Drive, Andover, MA 01810	Supporter Cards	\$3,520.80
1/25/2021	Daniel Arrigg Koh	21 Windemere Drive, Andover, MA 01810	Stamps	\$110.00
5/14/2021	Grace Chung	36 French Road, Greenwich, CT 06831	Donation Reimbursement	\$1,000.00
1/25/21	Jason Robins	90 Waltham St 2, Boston, MA, 02118	Donation Reimbursement	\$1,000.00
1/25/21	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$93.49
2/19/21	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$93.49
3/19/21	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$93.49
4/19/21	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$93.49
5/19/21	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$93.49
6/21/21	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$93.49
7/19/21	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$93.49
8/19/21	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$93.49
9/20/21	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$93.49
10/19/21	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$93.49
11/19/21	The Rocket Science Group, LLC	675 Ponce de Leon Ave NE, #5000, Atlanta, GA 30308	E-Mail Marketing Software	\$93.49
12/20/21	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
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
	See appended.			
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	\$112.29

Date Incurred	To Whom Due	Address	Purpose	Amount
11/8/21	Daniel Arrigg Koh	21 Windemere Drive, Andover, MA 01810	Telephone Services	\$112.29

LANDRY



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

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

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

Candidate Full Name (if applicable)

Office Sought and District

Residential Address

Telephone Number (optional):

Committee Name

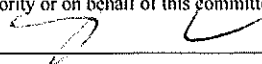
Name of Committee Treasurer

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="500"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="4,668.42"/>
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"/>

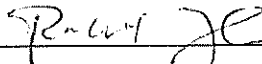
Affidavit of Committee Treasurer:
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind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

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)
		0	
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	← 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 2

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	← 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
2/10/2021	Greater Lawrence Community Action Council, Inc.	305 Essex Street (4th Floor) Lawrence, MA 01840	Charitable Donation	500
Line 12: Total Expenditures over \$50 (or listed above)				500
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				500

* 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	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 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)				
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. Page 6

MAJOR



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ANDOVER TOWN CLERK
RCVD 2022 JAN 19 PM 2:50

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Jan. 1, 2021 Ending Date: Dec. 31, 2021

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

Telephone Number (optional):

Major Committee
Committee Name

Elizabeth Bigelow
Name of Committee Treasurer

10 Wabanaki Way, Andover, MA 01810
Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>2956.20</u>
Line 2: Total receipts this period (page 3, line 11)	<u>- 0 -</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: 1/18/2022

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: 1/18/22

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 -	← 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				- 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 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

McCREADY



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ANDOVER TOWN CLERK
RCUD 2022 JAN 19 AM 10:53

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 4/13/21 Ending Date: 12/31/21

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	<u>2,511.51</u>
Line 2: Total receipts this period (page 3, line 11)	<u>- 0 -</u>
Line 3: Subtotal (line 1 plus line 2)	<u>2,511.51</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>- 0 -</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>2,511.51</u>
Line 6: Total in-kind contributions this period (page 6)	<u>- 0 -</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>5,049.12</u>
Line 8: Name of bank(s) used:	<u>DCU</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: Gina Murray (Treasurer's signature) Date: 1/7/21

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: Susan McCready (Candidate's signature) Date: 1/19/22

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 Mc Cready	8 Dean Circle Andover, MA 01810	2015 Campaign Signs	\$ 929.69
2/14/15	Susan Mc Cready	8 Dean Circle Andover, MA 01810	Loan to campaign to open Bank acct.	\$ 100.00
3/13/15	Susan Mc Cready	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 Friends 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

MURPHY



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ANDOVER TOWN CLERK
REC'D 2022 JAN 24 PM 3:51

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/21 Ending Date: 12/31/21

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

Paul Murphy
Candidate Full Name (if applicable)
Andover School Committee
Office Sought and District
6 School St, Andover MA 01810
Residential Address
E-mail: pmurphy@andover.edu
Phone # (optional): _____

Committee to Elect Paul Murphy
Committee Name
Sarah Pendleton
Name of Committee Treasurer
6 School St, Andover MA 01810
Committee Mailing Address
E-mail: pendletonsarah@yahoo.com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>164.51</u>
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	<u>164.51</u>
Line 4: Total expenditures this period (page 5, line 14)	
Line 5: Ending Balance (line 3 minus line 4)	<u>164.51</u>
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	<u>T.D. 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: Sarah C Pendleton (Treasurer's signature) Date: 1-22-22

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: 1-23-22

O'CONNOR



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ANDOVER TOWN CLERK
RCUD 2021 DEC 7 PM 4:23

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: JAN 1, 2021 Ending Date: DEC 31, 2021

Type of Report: (Check one)

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

MARGARET V. O'CONNOR
Candidate Full Name (if applicable)

Commissioner Andover Housing Authority
Office Sought and District

22 Railroad St (203) Andover, MA
Residential Address

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

Phone # (optional): 978-475-5993

[Signature]
Committee Name

[Signature]
Name of Committee Treasurer

[Signature]
Committee Mailing Address

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>W H / P</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: Margaret O'Connor (Candidate's signature) Date: 12-7-21

O'DONOGHUE



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-2021 Ending Date: 2-2-2022

Type of Report: (Check one)

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

<p><u>MARY T. O'DONOGHUE</u> Candidate Full Name (if applicable)</p> <hr/> <p><u>69 SALEM ST. ANDOVER MA.</u> Office Sought and District Residential Address</p> <p>E-mail: <u>MARYDONOGHUE@COMCAST.NET</u></p> <p>Phone # (optional): <u>978-337-8159</u></p>	<p>Committee Name</p> <hr/> <p>Name of Committee Treasurer</p> <hr/> <p>Committee Mailing Address</p> <hr/> <p>Phone # (optional):</p>
--	--

SUMMARY BALANCE INFORMATION:

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

Affidavit of Committee Treasurer: MY TREASURER, DON ROBB, IS DECEASED.
 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: Mary O'Donoghue (Candidate's signature) Date: 2-8-2022

PEKOCK



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

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

Type of Report: (Check one)

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

Steven R Pekock
Candidate Full Name (if applicable)
Trustee of Punchard Free School
Office Sought and District
109 Chestnut St
Residential Address
E-mail: qui-xotic@excite.com
Phone # (optional): _____

Committee Name

Name of Committee Treasurer

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

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0.00
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: <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: [Signature] (Candidate's signature) Date: 12/31/2021

SAXON



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

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

Type of Report: (Check one)

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

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	75.49
Line 2: Total receipts this period (page 3, line 11)	300.00
Line 3: Subtotal (line 1 plus line 2)	375.49
Line 4: Total expenditures this period (page 5, line 14)	50.00
Line 5: Ending Balance (line 3 minus line 4)	325.49
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: [Signature] (Treasurer's signature) Date: 1/19/2022

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

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

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

Signed under the penalties of perjury: Keith M. Saxon (Candidate's signature) Date: 1/19/2022

SCHEDULE A: RECEIPTS

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

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

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
11/12/2021	Keith Saxon 15 Wethersfield Drive Andover MA 01810	300.00	EHS / Facilities Manager American Science & Engineering
Line 9: Total Receipts over \$50 (or listed above)		300.00	
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		300.00	← 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			← 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.

SCHROEDER

SCULLY



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 1, 2021 Ending Date: December 31, 2021

Type of Report: (Check one)

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

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: saalexswells@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: 12/31/21

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:

Shannon Scully (Candidate's signature)

Date: 4 Jan 22

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 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.

SPRUCE



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ANDOVER TOWN CLERK
RCUD 2022 JAN 18 PM 4:10

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Apr 1, 2021 Ending Date: Dec 31, 2021

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)
Andover School Committee
Office Sought and District
23 Woodhaven Dr 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	1,986.33
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	1,986.33
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	1,986.33
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: Vanessa Weisman (Treasurer's signature) Date: 1/17/22

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: Tracey Spruce (Candidate's signature) Date: 1/18/22

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
			ANDOVER TOWN CLERK RCUM 2022 JAN 18 4:11	
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				

TEICHERT



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ANDOVER TOWN CLERK
RCUD 2022 JAN 20 PM3:11

File with: City or Town Clerk or Election Commission

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

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

Ted Teichert
Candidate Full Name (if applicable)

Office Sought and District

Residential Address

E-mail:

Phone # (optional):

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): 617-633-3490

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>2067.25</u>
Line 2: Total receipts this period (page 3, line 11)	<u>—</u>
Line 3: Subtotal (line 1 plus line 2)	<u>—</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>—</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>2067.25</u>
Line 6: Total in-kind contributions this period (page 6)	<u>—</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>—</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: [Signature] (Treasurer's signature) Date: 1/19/22

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: 1/19/22

VISPOLI



Commonwealth
of Massachusetts

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

ANDOVER TOWN CLERK
RCUD 2022 JAN 11 PM 3:56

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

CPF ID# 15452

Reporting Period: Beginning: 1/1/2021 Ending: 12/31/2021

Type of Report: 2021 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
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

1/11/22

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

1/11/22

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</u>	<u>To Whom Due</u>	<u>Reduction</u>	<u>Loan Amount</u>	<u>Purpose</u>
12/31/2020	Vispoli, Alex 7 Alison Way Andover, MA 01810		\$14,822.52	
	Outstanding Liabilities:		<u>\$14,822.52</u>	

ANDOVER TOWN CLERK
RCUD 2022 JAN 11 PM3:56

WANG



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with City or Town Clerk or Election Commission

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

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

<u>Shishan Wang</u> Candidate Full Name (if applicable)	<u>Committee to Elect Shishan Wang</u> Committee Name
<u>Andover School Committee</u> Office Sought and District	<u>Heping Liu</u> Name of Committee Treasurer
<u>10 Brady Loop Andover, MA 01810</u> Residential Address	<u>10 Brady Loop, Andover, MA 01810</u> Committee Mailing Address
E-mail: <u>shishan.wang@andover.com</u>	E-mail: <u>ahpingliu32@gmail.com</u>
Phone # (optional): _____	Phone # (optional): _____

Line 1: Ending Balance from previous report	<input type="text" value="0"/>
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="0"/>
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="0"/>
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="0"/>

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: 1/19/2022

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

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

Candidate without Committee
 I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.
 Signed under the penalties of perjury: _____ (Candidate's signature) Date: 1/19/2022

