



Form CPF M 102: Campaign Finance Report Office of Campaign and Political Finance 2018 MAY -4 AMII: 39

MILFORD, MASS

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File with: City or Town Clerk or Election Commission	5/3/2018
Reporting Period - Beginning: 3/26/2018	Ending: 4/27/2018
Type of report: 30 day after election	NA TATALOG MATERIAL MATERIAL TO SEE THE SECOND MATERIAL STATE AND SECOND
Type of Tepott. 30 day after election	
Michael P. Visconti, Jr	Committee to elect Michael P. Visconti, Jr
Full Name of Candidate	Committee Name
School Committee / Milford	Linda J. Visconti
Office Sought/ District	Name of Committee Treasurer
7 Muriel Lane	7 Muriel Lane
Milford, MA 01757	Milford, MA 01757
Residential Address	Committee Address
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Ending Balance from previous re Total receipts this period: Subtotal: Total expenditures this period: Ending Balance:	\$20.00 \$250.71 \$0.00 \$250.71
Total inkind contributions this	_
Total outstanding liabilities: Name of bank(s) used: Milfor	\$405.00
Affidavit of Committee Treasurer:  I certify that I have examined this report, including attached belief, a true and complete statement of all campaign finance expenditures, disbursements, inkind contributions and liabil finance activity of all persons acting under the authority of requirements of M.G.L. c. 55.	ed schedules and it is, to the best of my knowledge and e activity including all contributions, loans, receipts, ities for this reporting period and represents the campaign
Signed under the penalties of perjury:	
Treasurer's signature (in ink)	5-3-/
Affidavit of Candidate (check 1 box only) :	
Candidate with Committee and no activity independ	lent of the committee
I certify that I have examined this report, and attached sch true and complete statement of all campaign finance activity this committee in accordance with the requirements of M.G.L. any liabilities nor made any expenditures on my behalf durin	dedules and it is, to the best of my knowledge and belief, a r, of all persons acting under the authority or on behalf of c. 55. I have not received any contributions, incurred

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, 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.

## Schedule A: Receipts

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

Date	Name and Residential Address	Amount	Occupation and Employe
	nized Receipts emized Receipts ripts	\$0.00 \$20.00 \$20.00	

## 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 over \$50 and under may be added together from committee records, and reported on line 13.

Dai	te Name and Address	Amount	Purpose
Total	Itemized Expenditures Unitemized Expenditures Expenditures	\$0.00 \$0.00 \$0.00	

## Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind 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. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description Occupation/Employer
Total Item	nized Inkind Contributions	\$0.00	
Total Unit	emized Inkind Contributions	\$0.00	
Total Inki	nd Contributions	\$0.00	

## 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.

Date	To Whom Due	Amount	Purpose
3/25/2018	Michael P. Visconti, Jr. 7 Muriel Lane Milford, MA 01757	\$405.00	Campaign Ad
Total Outst	anding Liabilities	\$405.00	