

Form CPF M 102: Campaign Finance Report RECEIVED TOWN CLERK

Municipal Form

Office of Campaign and Political Finance

2021 相解 29 P并 4: 34

D MASSICHUSEUS	File with City or Town Clerk of Election Commiss
Fill in Reporting Period dates: Beginning Date: 01/	701/2021 Ending Date: 03/19/2021
Type of Report: (Check one)	
Sth day preceding preliminary	30 day after election year-end report dissolution
Matthew Zacchilli Candidate Full Nume (it applicable)	Committee to Elect Matthew Zacchilli Committee Name
Milford School Committee Office Sought and District	Victoria Zacchilli Name of Committee Freasurer
8 Packard Road, Milford MA 01757 Residential Address	8 Packard Road, Milford MA 01757 Committee Mailing Address
E-mail mzformilfordsc@qmail.com	E-mail mzformilfordsc@qmail.com
Phone # (optional): (508) 293-1703	Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 1)	1,706.04
Line 3: Subtotal (line 1 plus line 2)	1,706.04
Line 4: Total expenditures this period (page 5, lin	ne 14) 1,260.96
Line 5: Ending Balance (line 3 minus line 4)	445.08
Line 6: Total in-kind contributions this period (page 1)	age 6) 28.00
Line 7: Total (all) outstanding liabilities (page 7)	50.00
Line 8: Name of bank(s) used: Rockland Trus	
Mffdavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the bes ictivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind mance activity of all persons acting under the authority or on behalf of this committee in signed under the penalties of perjury:	l contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c. 55.
FOR CANDIDATE FILINGS ONLY: Affidavlt of Candidate: (check 1 be	ox only)
Candidate with Committee Certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in a meurical any habilities nor made any expenditures on my behalf during this reporting	he best of my knowledge and belief, a true and complete statement of all campaign finar econdance with the requirements of $MGA_{\rm c} \approx 55$. Thave not received any contributions giperrod 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 finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	is, in-kind contributions and habilities for this reporting period and represents the
igned under the penalties of perjury:	(Candidate's signature) Date 3/29/2021

SCHIDULE A RECEIPTS

Associated with the second content of the experience of the alphabeter deviced in all receipts mer 550 to a calendar to the experience of the experience of

(V. Schwinie V. Receipts" actachment is available to complete, print and attach to this report, if additional pages are required to report silvecerpts. 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)
3 0 0001	Carly & Jeremy Kearnan 27 Littlefield Rd, Milford MA	100,00	
3/2/2021	2/2021 Emily Crescenzi 15 Violet Ct, Milford MA		Administrative Director, Portrait Simple, Inc.
2/28/2021	John Erickson 10 Rosenfeld Ave, Milford MA	100.00	
3/10/2021	John Zacchilli 11 Short St, Milford MA	200.00	Attorney, Law Offices of John P. Zacchilli
2/8/2021 Joseph Zacchilli 3 Cabot Rd, Milford MA		250.00	Plumbing Inspector, Town of Milford
2/28/2021	Mary Ellen Kearnan 1 Robin Rd, Milford MA	100.00	
3/1/2021	Matthew Zacchilli 8 Packard Rd, Milford MA	50.00	
3/3/2021	Nick Zacchilli 5 Calvin Dr, Milford MA	100.00	
3/16/2021 Tom Delfanti 8 South Ter, Milford MA		75.00	
ine 9: Total Rece	ipts over \$50 (or listed above)	1,175.00	
ine 10: Total Rece	sipts \$50 and under* (not listed above)	531.04	
.ine 11: TOTAL RECEIPTS IN THE PERIOD 1,706.04			← linter 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)

Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)	
		L		
Line 9: Total Recei	pts over \$50 (or listed above)			
Line 10: Total Recei	pts S50 and under* (not listed above)			
Line 11: TOTAL R	ECEIPTS 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.)

report all expenditures. Please include your committee name and a page number on each page.) To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
3/1/2021	Big Daddy's Signs	24 Lexington Dr., Suite 1, Laconia, NH 03246	Yard Signs	390.77
3/16/2021	Staples, Inc.	220 Fortune Blvd. Milford, MA	Post Card Mailers	116.86
3/10/2021	Town Crier	48 Mechanic St. Upton MA, 01568	Print Ad	255.00
3/19/2021	Town Crier	48 Mechanic St. Upton MA, 01568	Print Ad	255.00
3/19/2021	USPS	2 Congress St, Ste 1 Milford, MA 01757	Postage	72.00
3/19/2021 USPS	2 Congress St, Ste 1 Milford, MA 01757	Postage	108.00	
				G.
	1	Line 12: Total Expenditures ov	ver \$50 (or listed above)	1,197.63
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	63.33
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	1,260.96

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 4

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	1+			
]		
]		
	<u> </u>			
		Line 12: Expenditures over \$	550 (or listed above)	
Line 13: Expenditures \$50 and under* (not listed above)				
	Enter on page 1, line 4 ↔			
			3 should include only those expenditure	L

^{*} 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 5	550 & under (not listed above)	28.00
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	28.00

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

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
3/1/2021	Matthew Zacchilli	8 Packard Road Milford, MA	Reimbursement	50.00
	P. C.	Line 18: TOTAL OUTSTAND	NNC (D4 DH 1700c /4/ /	50.00