Paul Mazzuchelli-School comm.



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

with: or Town Clerk or Election Commission Please print or type all int	formation, except signatures. MILFORD, MASS.
Fill in dates: Reporting Period Beginning \(\text{\text{Month}} \)	7 70
Type of report: (Check one) ☐ 8th day preceding preliminary 8th day preceding election	on □30 day after election □year-end report □dissolution
Paul A MAZZYChelli	
15 () Full Name of Gandidate (if applicable)	Committee Name
Office Sought and District	Name of Committee Treasurer
22Woodnidge Road Residential Address	Committee Mailing Address
Millorn Residential Address 8-473-6998	
Tel. No. (optional)	Tel. No. (optional)
Line 1: Ending balance from pre Line 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this p Line 5: Ending balance (line 3 minus	(page 2, line 11)
Line 6: Total in-kind contributions	
	pilities (page 4) \$ N/A

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 (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate:	(check 1 box only)	-
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☐ 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.I. c. 55. ned under the penalties of p

Candidate signature (in ink)

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Tota	al receipts in excess of \$50 (or listed above)		
Line 10: Tota	al receipts \$50 and under* (not listed above)		
	TAL 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.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

mber on each Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amoi	unt
3/19/10	Millor D town Criek	Mechanic St lepton MA	1/2 the page ad.	210	00
			0.50	210	00
			Expenditures over \$50	210	1
		Line 13	: Expenditures \$50 and under	*-N/1	\ n
	Enter on page 1, line 4		4:TOTAL EXPENDITURES		0

If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not Page 3

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			7.11.1	
			In-kind over \$50	
			In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	

^{*} 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: OUTSTANDING LIABILITIES (ALL)	

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

Page 4

Your Mazzuchelli



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

le with: ty or Town Clerk or Election Commission Please print or type all inf	formation, except signatures.
Fill in dates: Reporting Period Beginning 3 3/ /(
Type of report: (Check one) □8th day preceding preliminary □8th day preceding election	on 130 day after election year-end report dissolution
Tau MAZZUChe ((if applicable)	Committee Name
Office Sought and District	Name of Committee Treasurer
22 Woodridge Company of Sold Residential Address 998	Committee Mailing Address
Tel. No. (optional)	Tel. No. (optional)
Line 1: Ending balance from pre Line 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this p Line 5: Ending balance (line 3 minus Line 6: Total in-kind contributions Line 7: Total (all) outstanding liab Line 8: Name of bank(s) used	(page 2, line 11) S Deriod (page 3, line 14) S line 4) S this period (page 4) S line 4

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 Signed under the penalties of perjury: M.G.L. c. 55.

Treasurer's signature (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

	of Candidate:	(abook 1	how only
4 *** ** ** ***	ort andidate:	CHECK	DOX OHIVE

Candidate with Committee and no activity independent of the committee

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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 activity 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 signature (in ink)

MAY 6, 2010

SCHEDULE A: RECEIPTS

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This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
eceived	(aiphabeticai iisting require)			
				E A TENNES OF A PARTY AND A STATE OF A STATE
			13 177	
Line 9: T	otal receipts in excess of \$50 (or listed above)		1	
	·			
	otal receipts \$50 and under* (not listed above)	1	tte y pe	Fitzer on mage 1. line 2
Line 11: T	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.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
			The second second second	
	Herminal Later Transition			
			12: Expenditures over \$50	
	Enter on page 1, line 4		13: Expenditures \$50 and under* 14:TOTAL EXPENDITURES	0

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not Page 3 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		The second second		
			In-kind over \$50	
	Enter on page 1, line 6	Maria de la companya del companya de la companya de la companya del companya de la companya de l	In-kind \$50 and under Total In-kind	0

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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				
E	Inter on page 1, line 7	Line 18: OUTSTANDING LIA	ABILITIES (ALL)	0

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Page 4



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Municipal Form

Office of Campaign and Political Finance

with: or Town Clerk or Election Commission Please print or type all information, except signatures	« MILFORD, M	ΔS
Fill in dates: Reporting Period Beginning 5 6 10 Ending 12	-: 10	
Type of report: (Check one) ☐ 8th day preceding election ☐ 30 day after election	Myear-end report □dissolu	ıtior
Paul A M422116 halli)
Full Name of Candidate (if applicable)	ittee Name	
School Committee		
22 Woodridge, RO, Miller		
Residential Address 0 Committee	Iailing Address	
Tel. No. (optional)	Tel. No. (optional)	
SUMMARY BALANCE INFORMATIO Line 1: Ending balance from previous report	s 0	
Line 2: Total receipts this period (page 2, line 11)	\$ 0	
Line 3: Subtotal (line 1 plus line 2)	\$ 0	
Line 4: Total expenditures this period (page 3, line 14)	\$ Q	
Line 5: Ending balance (line 3 minus line 4)	\$	
Line 6: Total in-kind contributions this period (page 4)	· s 0	
Line 7: Total (all) outstanding liabilities (page 4)	\$ 0	
Line 8: Name of bank(s) used		

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 Signed under the penalties of perjury: M.G.L. c. 55.

Treasurer's signature (in ink)

Date

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A	CC: 1 ! 4	of Candidate:	(abaal 1	how anly
А	maavii	of Candidate:	I CHECK I	DUX UHIY)

☐ Candidate with Committee and no activity independent of the committee

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Candidate signature (in ink)