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

Office of Campaign and Political Finance

RECEIVED  
TOWN CLERK'S OFFICE  
2010 MAR 29 AM 9:18  
MILFORD, MA 01757

File with:  
City or Town Clerk or Election Commission

Please print or type all information, except signatures

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

1. Committee Name: Committee To Re-Elect Brian Murray Selectman  
(The name of the committee must include the candidate's last name)
2. Committee Address: 260 Main Street, Milford, MA 01757

2a. Mailing Address: Same

Purpose: To Re-Elect Brian Murray Selectman, Milford, MA. 01757

- | 3. Officers:   | Name                   | Residential Address                     | Zip             | Tel. No.            |
|----------------|------------------------|---|-----------------|---------------------|
| Chairman:      | <u>Brian W. Murray</u> | <u>23 Congress Terrace, Milford, MA</u> | <u>01757</u>    | <u>508-473-9045</u> |
| Treasurer:     | <u>Maria Gomes</u>     | <u>20 Roland Way, Milford,</u>          | <u>MA 01757</u> | <u>508-473-1740</u> |
| Other officer: |                        |   |                 |                     |
| Other officer: |                        |   |                 |                     |

Attach additional page, if necessary, with other officers and finance committee, if any

- |                   |                        |   |                                  |                     |
|-------------------|------------------------|---|----------------------------------|---------------------|
| 4. Candidate:     | <u>Brian W. Murray</u> | <u>23 Congress Terrace, Milford, MA</u> | <u>01757</u>                     | <u>508-473-9045</u> |
|                   | Name                   |   | Zip                              | Tel. No.            |
| 5. Office Sought: | <u>Selectman</u>       | <u>Town of Milford</u>                  | <u>Democrat</u>                  |                     |
|                   | Title                  | District                                | Party affiliation, if applicable |                     |

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

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature] 3/29/10  
Candidate's signature Date

I hereby accept the office of treasurer of the above-named committee. I understand that I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

Maria Gomes 3/29/10  
Treasurer's signature Date

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

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature] 3/29/10  
Chairman's signature Date



Commonwealth of  
Massachusetts

File with:

City or Town Clerk or Election Commission

# Form CPF M 102: Campaign Finance Report

## Municipal Form

Office of Campaign and Political Finance

Please print or type all information, except signatures.

Fill in dates:	Month	Day	Year	Month	Day
Reporting Period Beginning	1	4	10	Ending	3 29
Type of report: (Check one)					
<input checked="" type="checkbox"/> 08th day preceding preliminary <input checked="" type="checkbox"/> 8th day preceding election <input type="checkbox"/> 30 day after election <input type="checkbox"/> Year-end report <input type="checkbox"/> dissolution					

Full Name of Candidate (if applicable)

Brian W. Murray

Committee Name

Committee to Re-Elect Brian Murray Selectman

Office Sought and District  
Selectman

Name of Committee Treasurer  
Maria Gomes

Residential Address  
23 Congress Terr., Milford, MA

Committee Mailing Address  
260 Main Street, Milford, MA

508-473-9045

Tel No. (optional)

Tel No. (optional)

Line 1: Ending balance from previous report	\$0
Line 2: Total receipts this period (page 2, line 11)	\$10,106.61
Line 3: Subtotal (line 1 plus line 2)	\$10,106.61
Line 4: Total expenditures this period (page 3, line 14)	\$ 8,365.79
Line 5: Ending balance (line 3 minus line 4)	\$ 1,740.82
Line 6: Total in-kind contributions this period (page 4)	\$ 450.00
Line 7: Total (all) outstanding liabilities (page 4)	\$ 5,240.61
Line 8: Name of bank(s) used	<u>Milford Federal</u>

### FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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:

Maria Gomes

Treasurer's signature (in ink)

3/29/10

Date

Affidavit of Candidate: (check 1 box only)

☒ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report 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 signature (in ink)

Brian W. Murray

# 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 list 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 number on each page.

Date Receive	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
3/13/10	Baranauskas, Lawrence J. & Loriann N. 10 Jencks Rd., Milford, MA. 01757	100	00	
3/13/10	Beccia, John A. Jr. 61 Godfrey Lane, Milford, MA 01757	50	00	
3/13/10	Bertonazzi, David L. & Paulette A. 11 Fox Lane, Milford, MA. 01757	50	00	
3/13/10	Bodio, Brian & Eva 8 Ferguson St., Milford, MA. 01757	100	00	
3/12/10	Bon Tempo, Noel C., M.D. & Evelyn Davoren 3 West Walnut St., Milford, MA. 01757	100	00	
3/13/10	Bowen, Teresa Breen 57 Sunset Dr., Milford, MA. 01757	100	00	
3/13/10	Brucato, John M. & Linda E. 12 Whip O Will Lane, Milford, MA. 01757	50	00	
3/13/10	Burns, Gregory S. & Shelly M. 6 Winterberry Lane, Milford, MA. 01757	100	00	
3/14/10	Cullen, Thomas J. 8 Carriage Path, Uxbridge, MA. 01757	100	00	
3/13/10	Cummings, Claire L. 103 Purchase St., Milford, MA. 01757	50	00	
3/13/10	Dagnese, John W. & Judith A. 25 Hamilton Ave., Milford, MA. 01757	150	00	
3/7/10	DeLuzio, Renaldo & Jean 36 Asylum St., Milford, MA. 01757	100	00	
3/8/10	Ferrera, Regina A. 25 Shadowbrook Lane, #20, Milford, MA 01757	50	00	
3/13/10	Flumere, Brian J., Sr. & Janet A. 25 Carp Rd., Milford, MA. 01757	50	00	
3/9/10	Fokas, Konstantinos B. & Ismini 14 Emmons St., Milford, MA. 01757	100	00	
3/12/10	Hancox, Anne Barnes 25 Pine Island Rd., Milford, MA. 01757	50	00	
3/13/10	Lynch, Thomas F. & Carla M. PO Box 696, Milford, MA. 01757	50	00	
3/12/10	Marshall, Scott Robert & Lisa A. 36 Field Pond Rd., Milford, MA. 01757	50	00	
3/12/10	Melanson, James V. & Karen A 1 Branch St., Milford, MA. 01757	100	00	
Line 9: Total receipts in excess of \$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

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

Date Receive	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
2/16/10- 3/19/10	Murray, Brian W. (Loan) 23 Congress Terrace, Milford, MA 01757	5,240	61	Attorney --self-employed
3/13/10	Morin, Arthur E. & Patricia A. 20 Radcliffe Dr., Milford, MA. 01757	50	00	
3/13/10	Moynihan, Peter J. & Jayne T. 9 Larson Rd., Milford, MA. 01757	50	00	
3/13/10	Nelson, Mark A. & Alison A. 10 Quinshipaug Rd., Milford, MA. 01757	50	00	
3/13/10	Pyne, David H. & Kristin L. 7 Cormier Circle, Milford, MA. 01757	200	00	Salesman - Hillview Equipment & Leasing Co. Inc.
3/13/10	Solimine, Michael & Katherine 66 Sunset Drive, Milford, MA. 01757	50	00	
3/2/10	Starkis, Andre J. & Virginia R. 278 Purchase St., Milford, MA. 01757	100	00	
3/13/10	Tessicini, John B. & Alice E. 3 Ivy Lane, Milford, MA. 01757	50	00	
2/26/10	Valorie, Nicholas D. 5 Nicholas Rd., Milford, MA 01757	200	00	Finance--self-employed
Line 9: Total receipts in excess of \$50 (or listed above)		7,490.	61	Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)		2,616.	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		10,106	61	

## 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 number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
3/1/10	Ashtown Technologies	9 Main Street Manchaug, MA 01526-0421	Website Hosting	500	00
3/25/10	Jet Press	323 Main Street Milford, MA 01757	Printing	941	38
3/4/10; 3/11/10; 3/16/10; 3/19/10; 3/24/10	Milford Post Office	Congress St. Milford, MA. 01757	Postage	448	00
3/1/10; 3/18/10; 3/25/10	Town Crier Publications	48 Mechanic Street Upton, MA 01568	Advertising	3,360	00
2/22/10; 3/5/10	WMRC	258 Main Street Milford, MA 01757	Advertising	2,959	00
		Line 12: Expenditures over \$50		8,208	38
		Line 13: Expenditures \$50 and under *		157	41
		Line 14: TOTAL EXPENDITURES		8,365	79

**\*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
3/13/10	Alfred P. Scioli	31 Edwards Rd. Mendon, MA. 01756	T-Shirts	250.00
3/13/10	Emilio Diotalevi	26 Cedar Street Milford, MA 01757	Marchegiano Club Space – Bake Sale	200.00
Line 15: In-kind over \$50				450.00
Line 16: In-kind \$50 and under				0
Line 17: Total In-kind				450.00

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

## SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount
2/16/10-3/19/10	Murray, Brian W.	23 Congress Terrace Milford, MA 01757	Loan from candidate	5,240.61
Enter on page 1, line 7		Line 18: OUTSTANDING LIABILITIES (ALL)		5,240.61

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.

Brian murray- Selectman



Commonwealth of  
Massachusetts

File with:

City or Town Clerk or Election Commission

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED  
TOWN CLERK'S OFFICE

2010 MAY -5 AM 11:10

MILFORD, MASS.

Please print or type all information, except signatures.

Fill in dates:	Month	Day	Year	Month	Day	Year
Reporting Period Beginning	3	30	10	Ending	5	10
Type of report: (Check one)						
08th day preceding preliminary <input type="checkbox"/> 8th day preceding election <input type="checkbox"/> 30 day after election <input type="checkbox"/> Year-end report <input type="checkbox"/> dissolution						

Full Name of Candidate (if applicable)

Brian W. Murray

Committee Name

Committee to Re-Elect Brian Murray Selectman

Office Sought and District  
Selectman

Name of Committee Treasurer  
Maria Gomes

Residential Address

23 Congress Terr., Milford, MA.

Committee Mailing Address

260 Main Street, Milford, MA

508-473-9045

Tel No. (optional)

Tel No. (optional)

Line 1: Ending balance from previous report	\$1,740.82
Line 2: Total receipts this period (page 2, line 11)	\$ 500.00
Line 3: Subtotal (line 1 plus line 2)	\$2,240.82
Line 4: Total expenditures this period (page 3, line 14)	\$2,240.82
Line 5: Ending balance (line 3 minus line 4)	\$ 0
Line 6: Total in-kind contributions this period (page 4)	\$ 0
Line 7: Total (all) outstanding liabilities (page 4)	\$4,263.79
Line 8: Name of bank(s) used	<u>Milford Federal Savings and Loan</u>

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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:

Maria Gomes

Treasurer's signature (in ink)

5/5/10

Date

Affidavit of Candidate: (check 1 box only)

☒ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report 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 signature (in ink)

Brian W. Murray

# 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 list 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 number on each page.

Date Receive	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
4/1/10	Celeste, Joseph & Brenda 32 Bates St., Mendon, MA 01756	100	00	
3/31/10	Davoren, Thomas & Sandra 25 Field Pond Rd., Milford, MA 01757	200	00	Retired educator
3/31/10	Heller, Richard & Linda 103 Congress St., Milford, MA 01757	100	00	
3/31/10	McNaney, Harold 5 Dartmouth Dr., Milford, MA 01757	50	00	
Line 9: Total receipts in excess of \$50 (or listed above)		450	00	Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)		50	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		500	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 \$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 number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
4/7/10	Milford Package Store	270 Main St. Milford, MA 01757	Election Day Party	72	00
4/20/10	Milford Post Office	Congress St. Milford, MA 01757	Postage	94	39
5/5/10	Murray, Brian W.	23 Congress Terr. Milford, MA 01757	Reimbursement of Loan	976	82
4/5/10	Olivas Market	83-85 E. Main St. Milford, MA 01757	Election Day Food	175	11
4/17/10	Town Crier Publications	48 Mechanic St. Upton, Ma 01568	Thank you Ad	420	00
3/31/10	WMRC	258 Main St. Milford, MA 01757	Advertising	108	00
4/22/10	Trattoria Restaurant	89 Main St. Milford, MA 01757	Volunteer Thank you Gifts	350	00
Line 12: Expenditures over \$50				2196	32
Line 13: Expenditures \$50 and under *				44	50
Line 14: TOTAL EXPENDITURES				2240	82

**\*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				0

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

## SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount
2/16/10-3/19/10	Murray, Brian W.	23 Congress Terrace Milford, MA 01757	Loan from candidate (balance after reimb.)	4263.79
Enter on page 1, line 7		Line 18: OUTSTANDING LIABILITIES (ALL)		4263.79

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.



# Form CPF M 102: Campaign Finance Report

## Municipal Form

Office of Campaign and Political Finance

RECEIVED  
OWN CLERK'S OFFICE

2011 JAN 20 PM 2:29

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

MILFORD, MASS

Fill in dates:

Reporting Period Beginning

Month

5

Day

6

Year

10

Ending

Month

12

Day

31

Year

2010

Type of report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☐ 30 day after election

☒ Year-end report

☐ dissolution

BRIAN W. MURRAY

Full Name of Candidate (if applicable)

SELECTMAN

Office Sought and District

23 CONGRESS TERRACE

Residential Address

508 413 9045

Tel. No. (optional)

COMMITTEE TO RE-ELECT BRIAN MURRAY

Committee Name

SELECTMAN

MARIA GOMES

Name of Committee Treasurer

260 MAIN ST. MILFORD

Committee Mailing Address

508 413 1740

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report

\$ 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)

\$ 0

Line 5: Ending balance (line 3 minus line 4)

\$ 0

Line 6: Total in-kind contributions this period (page 4)

\$ 0

Line 7: Total (all) outstanding liabilities (page 4)

\$ 4263.75

Line 8: Name of bank(s) used MILFORD FEDERAL SAVINGS AND LOAN

### 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:

Maria Gomes

Treasurer's signature (in ink)

1/20/11

Date

### FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

### 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:

Brian W. Murray

Candidate signature (in ink)

1/20/11

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.*

This page may be copied 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)
N/A	NONE	0		N/A
Line 9: Total receipts in excess of \$50 (or listed above)		0		Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)		0		
<b>TOTAL RECEIPTS IN THE PERIOD</b>		0		

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

**Page 2**

# **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 number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
N/A	NONE	N/A	N/A	0	
Line 12: Expenditures over \$50				0	
Line 13: Expenditures \$50 and under*				0	
Line 14: TOTAL EXPENDITURES				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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
N/A	NONE	N/A	N/A	0
Line 15: In-kind over \$50				0
Line 16: In-kind \$50 and under				0
Line 17: Total In-kind				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
2/16/10 - 3/19/10	MURRAY, BRIAN W.	23 Congress Terrace MILFORD MA 01757	Loan from Candidate (Balance After Reimb.)	\$ 4263.79
Line 18: OUTSTANDING LIABILITIES (ALL)				\$ 4263.79

Enter on page 1, line 7

Printed if additional pages are required to report all activity. Please include your committee name and a page number