

# Form CPF M 102: Campaign Finance Report

**Municipal Form** 

Office of Campaign and Political Finance

of Massachusetts		File with: C	ity or Town Clerk or E	lection Commission
Fill in Reporting Period dates: Beginning Date: June	3, 2020 En		une 15, 2020	<b>3</b> 5
Type of Report: (Check one)  ☐ 8th day preceding preliminary ☐ 8th day preceding election		ion 🗌 year	r-end report	dissolution
Scott J Crisafulli	Committee To Ele	ct Scott Crisafull	i	
Candidate Full Name (if applicable)	Committee to Lie	Committe		
Highway Surveyor	Laura J Crisafulli			
Office Sought and District	F2 U	Name of Comm		
52 Harding Street Milford Ma 01757  Residential Address	52 Harding Street	Committee Ma		
E-mail:	E-mail:	Committee Ma	aning reduces	
Phone # (optional): (774) 573-7302	Phone # (optional):	(	(508) 400-7228	
SUMMARY BALAN	TE INFODMATI	ON.		1
Line 1: Ending Balance from previous report	E INFORMATI	ON:	575.12	
Line 2: Total receipts this period (page 3, line 1)	)		2,400	<b>=</b>
Line 3: Subtotal (line 1 plus line 2)			2,975.12	92
Line 4: Total expenditures this period (page 5, li	ne 14)		2,923.64	100
Line 5: Ending Balance (line 3 minus line 4)			51.48	
Line 6: Total in-kind contributions this period (p	age 6)		1.9	社会
Line 7: Total (all) outstanding liabilities (page 7			3,665	23
Line 8: Name of bank(s) used: UNIBANK FOR SAV	NGS			
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-king finance activity of all persons acting under the authority or on behalf of this committee is Signed under the penalties of perjury:	contributions and liabilities accordance with the requirement (Tree	s for this reporting pe	eriod and represents th	e campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 l	ox only)			
Candidate with Committee  I 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 incurred any liabilities nor made any expenditures on my behalf during this reporting.	cordance with the requiren	nents of M.G.L. c. 55	<ol><li>I have not received</li></ol>	Il campaign finance any contributions,
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 contributions.	s, in-kind contributions and	l liabilities for this re	porting period and rep	all campaign presents the
Signed under the penalties of perjury:	(Ca	ndidate's signature)	Date: June	15, 2020

#### **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)
Jun 3, 2020	Michael Spence 30 Water Street Dorchester Ma 02122	500	City of Boston Police Officer
ine 9: Total Recei	ipts over \$50 (or listed above)	500	L
ine 10: Total Rece	sipts \$50 and under* (not listed above)	1,900	
ine 11: TOTAL I	RECEIPTS IN THE PERIOD	2,400	← Enter on page 1, line 2

<sup>\*</sup> 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)
ne Q: Total Dagain	ts over \$50 (or listed above)		
	ots \$50 and under* (not listed above)		
e 11: TOTAL RI	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<sup>\*</sup> 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.)

eport all expen		mittee name and a page number or	n each page.)	
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Jul 2, 2020	MP DESIGN	346 BELKNAP ROAD FRAMINGHAM MA 01701	POSTCARD DESIGN	40
Jul 12, 2020	STARBURST PRINTING	300 HOPPING BROOK ROAD HOLLISTON MA 01746	6 X 11 POSTCARDS	993.44
Jun 5, 2020	TOWN CRIER	48 MECHANIC STREET UPTON MA 01568	1/2 PAGE COLOR AD	1,635.2
Jun 23, 2020	TOWN CRIER	48 MECHANIC STREET UPTON MA 01568	1/8 COLOR AD	255
1				
		Line 12: Total Expenditures ov	er \$50 (or listed above)	2,923.64
		Line 13: Total Expenditures \$50	and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	2,923.64

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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### **SCHEDULE B: EXPENDITURES (continued)**

	To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
	0.00				
		Line 12: Expenditures over \$50	(or listed above)		
		Line 13: Expenditures \$50 and	under* (not listed above)		
	Finter on page 1 line 4 →	Line 14: TOTAL EXPENDIT			
		r, include them in line 12. Line 13 si			

<sup>\*</sup> 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		

<sup>\*</sup> 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.

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#### **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
Feb 28, 2020	SCOTT CRISAFULLI	52 HARDING STREET MILFORD MA 01757	AGE GRAPHICS-SIGNS	665
Mar 1, 2020	SCOTT CRISAFULLI	52 HARDING STREET MILFORD MA 01757	LOAN TO COMMITTEE	3,000
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	3,665

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