



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

DUE DATE:

APRIL 2, 2012

Commonwealth of Massachusetts

RECEIVED

File with:
City or Town Clerk or Election Commission

Release 5/01 or type all information, except signatures.

Fill in dates: Reporting Period Beginning JANUARY 1, 2021 Ending MARCH 23, 2021

Type of report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

ANDREW NEWTON DESLAURIER
Full Name of Candidate (if applicable)

SELECT BOARD

Office Sought and District
32 MT PLEASANT ST

Residential Address
BILLERICA MA 01862

Tel. No. (optional)

CTE Andrew Des Laurier
Committee Name

Michael Riley
Name of Committee Treasurer

46 Bedford ST. Billerica MA 01821
Committee Mailing Address

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>766.62</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>6283.50</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>7050.12</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>4546.10</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>2504.02</u>
Line 6: Total in-kind contributions this period (page 4)	\$ _____
Line 7: Total (all) outstanding liabilities (page 4)	\$ _____
Line 8: Name of bank(s) used	<u>Enterprise Bank</u>

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:

Michael Riley
Treasurer's signature (in ink)

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:

Candidate signature (in ink)

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)
1/12/21	Mary Ann Durant	100	00	
1/12/21	Jim Davis 63 Oak St. Billerica MA	100	00	
1/17/21	Patricia Riley 46 Bedford St Billerica MA 01821	100	00	
1/14/21	MARK Komaricki 45 Ridge way Ave Billerica MA 01821	100	00	
1/14/21	Sheron Henley 6 Captains way Billerica MA 01821	50	00	
1/18/21	Bob Runley 8 Birch St. Billerica MA 01821	500	00	Runley Painting Serv.
1/20/21	Phil Newell 145 Hight St. Billerica MA 01821	75	00	
1/20/21	Sally 86 Penbuton Ave Tamestown RI. 02875	500	00	
1/22/21	Fred Cianci 12 W. Main Rd Billerica MA 01821	500	00	Fredrick Cianci CPA PC
1/24/21	Paul Newell 145 Hight St. Billerica MA	75	00	
1/24/21	Barbara Shea 42 Tercentennial Dr Billerica MA 01821	50	00	
1/28/21	Local 103 256 Freeport St. Dorchester MA 02122	250	00	IBEW International Electricians
1/30/21	Travis Reef 66 Riveredge Rd. Billerica MA 01821	200	00	
1/30/21	Brenda Komaricki 45 Ridge way Ave Billerica MA 01821	50	00	
1/30/21	Mark Estratton 3 Dudley Rd. Billerica MA 01821	300	00	DIAPY LABS
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

* 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 number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
3/15/21	Print Works Potter Printing		SIGNS	961	36
3/19/21	Potter Printing		SIGNS	321	50
	Billerica Scholarship Foundation		Scholarships	100	00
3/24/21	POTTER Printing		SIGNS	532	31
	Face Book		Ads	225	00
3/20/21	Mass Dems		Donation	1500	00
3/08/21	Call Hub		Phone Calls	250	00
	You Tube		Videos/ Ads	181	00
3/02/21	zoom		Conference Calls	15	93
3/09/21	Nation Builder		Website	159	00
3/16/21	Face Book		Ads Social media	75	00
3/22/21	Face Book		" "	75	00
3/22/21	Face Book		" "	75	00
3/26/21	Home Depot		Miscellaneous Sign Building	25.	56
3/26/21	Face Book		Social media	125	00
3/30/21	Face Book		Social media	150	00
Line 12: Expenditures over \$50					
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				41546	10

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
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			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)	

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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 number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
2/16/21	Carol Meyer 17 Beechmont Ave Billerica ma. 01821	50	00	
2/16/21	Democratic Town Committee P.O. Box 214 01821	200	00	Billerica Democratic com
2/16/21	Jeany Ranch P.O. Box 107 W. Billerica ma. 01821	100	00	
2/16/21	Rino Moricant 53 River St. Billerica ma. 01821	50	00	
2/16/21	Jim Gately 12 Dignity Rd. Billerica ma. 01821	100	00	
2/17/21	Christopher Tribon 13 Bridle Rd. Billerica MA 01822	1000	00	MA warehouse employee
2/20/21	Carpenter's Local 339 350 Fordham Rd Wilmington MA 01887	500	00	Labour union carpenters
2/20/21	Tree Reef 66 Riveredge Rd Billerica ma. 01821	100	00	
2/22/21	Reneka Margehagan	200	00	
2/22/21	Mary McBride P.O. Box 518 Wilmington MA	150	00	
3/22/21	Brian Kelly 8 Rolling Hill Rd. 01821	193	90	
3/25/21	Ryan Miles 40 Gilman Rd. Billerica ma. 01821	96	80	
3/25/21	Barbara Flaherty 20 Fountain St Billerica ma. 01821	96	80	
3/25/21	Tree Reef 66 Riveredge Rd. Billerica ma. 01821	100	00	
3/29/21	Billerica Federation of Teachers 36 River St. Billerica ma. 01821	500	00	Billerica Teacher union
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

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

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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 number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
7/25/21	Um Tran	100	00	
3/25/21	Katie Mahony 15 Brittany Ln Billerica MA 01821	100	00	
3/25/21	Joe Donohue 8 Patten Rd Billerica MA 01822	96	80	
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		6283	50	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.