

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk of Election Commission				
Fill in Reporting Period dates: Beginning Date: Jan 1,	State and the st				
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election ☐					
	Committee to elect Andrew Deslaurier				
Andrew Deslaurier Candidate Full Name (if applicable)	Committee Name				
Selectman - Billerica	Edward Giroux				
Office Sought and District	Name of Committee Treasurer				
32 Mt. Pleasant Street, North Billerica MA 01862	21 Horman Road, North Billerica MA 01862				
Residential Address	Committee Mailing Address				
Telephone Number (optional): (978) 262-1418	Telephone Number (optional): (978) 667-0521				
SUMMARY BALANCE	INFORMATION:				
Line 1: Ending Balance from previous report	57.51				
Line 2: Total receipts this period (page 3, line 11)	5,220				
Line 3: Subtotal (line 1 plus line 2)	5,277.51				
Line 4: Total expenditures this period (page 5, line	14) 4,366.3				
Line 5: Ending Balance (line 3 minus line 4)	911.21				
Line 6: Total in-kind contributions this period (pag	e 6) 325				
Line 7: Total (all) outstanding liabilities (page 7)	0				
Line 8: Name of bank(s) used: Enterprise Bank					
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: (Treasurer's signature) Date: Apr 3, 2015					
FOR CANDIDATE FILINGS ONLY: 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 b activity, of all persons acting under the authority or on behalf of this committee in accommended any liabilities nor made any expenditures on my behalf during this reporting p	rdance with the requirements of M.G.L. c. 55. I have not received any contributions,				
Candidate without Committee OR Candidate with independent activity filing separate of I certify that I have examined this report including attached schedules and it is, to the befinance activity, including contributions, loans, receipts, expenditures, disbursements, it campaign finance activity of all persons acting under the authority or on behalf of this comparison.	est of my knowledge and belief, a true and complete statement of all campaign n-kind contributions and liabilities for this reporting period and represents the				
Signed under the penalties of perjury:	(Candidate's signature) Date: Apr 3, 2015				

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.)

Mar 14, 2015 Mar 14, 2015	(alphabetical listing required) Billerica Democratic Town Committee 8 Hawks Ridge Road North Billerica MA 01862 Joe Bradley 9 Fountain St. Billerica MA 01821	500 100	(for contributions of \$200 or more) Political Committee
Mar 14, 2015 Mar 14, 2015	8 Hawks Ridge Road North Billerica MA 01862 Joe Bradley 9 Fountain St. Billerica MA 01821		Political Committee
Mar 14, 2015	9 Fountain St. Billerica MA 01821	100	
	Frod Ciampa		
Mar 27, 2015	Fred Ciampa 10 Bearer PL Billenia MA 01821	250	CPA, Self employed
Feb 9, 2015	Margaret Deslaurier 24 Cayuga Road Charlestown RI 02813	250	Retired
Feb 21, 2015	Mark Efstratiou 33 Dudley Road Billerica MA 01821	150	
Mar 13, 2015	Connie Fournelle 2 Good Street Billerica MA 01821	100	
Feb 21, 2015	Edward & Sandra Giroux 21 Horman Road North Billerica MA 01862	76	
Feb 21, 2015	Brian Kelly 8 Rolling Hill Road Billerica MA 01821	100	
Mar 14, 2015	John Kleschinsky 33 Broadway St. North Billerica MA 01862	75	
Jan 31, 2015	Deb Lash 28 Woodside Road North Billerica MA 01862	200	Graphic Designer
	Robert McGowan 12 Margaret Road Billerica MA 01821	100	
Feb 21, 2015	Tim Morgan 23 Woodbury Road Billerica MA 01821	100	
Line 9: Total Receip	ots over \$50 (or listed above)		
Line 10: Total Recei	pts \$50 and under* (not listed above)		
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Feb 18, 2015	Robert Newton 23 Pine Brook Road Wayland MA 01778	250	CEO, Eastern Transit
Feb 20, 2015	Mortimer Newton 91 Friendship St Providence RI 02903	250	Attorney
Feb 21, 2015	Pipefitters Local 537 35 Travis St. Unit 2 Allston MA 02134	250	Labor Union
Feb 21, 2015	Kate Poirier 1424 Van Buren St. Washington DC 20012	100	
Feb 21, 2015	Ellen Rawlings 5 Burnham St North Billerica MA 01862	100	
Dec 21, 2014	Michael Riley 46 Bedford Street Billerica MA 01821	150	
Jan 29, 2015	Kathleen Shuhy 86 Pemberton Ave. Jamestown RI 02835	200	Homemaker
Feb 18, 2015	Colleen Strati 13 Ferren Drive Billerica MA 01821	100	
Line 9: Total Rece	ipts over \$50 (or listed above)	3,401	
Line 10: Total Rec	eipts \$50 and under* (not listed above)	1,819	
	RECEIPTS IN THE PERIOD	5,220	Enter on page 1, line 2 d include only those receipts not itemized above.

^{*} 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.)

	ditures. Please include your com To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Mar 20, 2015	Carbon Colors LLC	1274 Lakeview Ave. Dracut MA 01826	Lawn Signs	637.5
Mar 27, 2015	Copley Business Services	18 Alpha Road #2 Chelmsford MA 01824	Printing of Campaign Material	2,651
eb 21, 2015	Country Club of BillericA	51 Baldwin Road Billerica MA 01821	Campaign Event	478.13
far 14, 2015	John Ryan's Pub	56 Chelmsford Road North Billerica MA 01862	Campaign Event	200
Mar 18, 2015	Deb Lash	28 Woodside Dr N. Billerica MA 01862	Reimbursement for campaign banners	375.36
	And And Reference	Line 12: Total Expenditures	over \$50 (or listed above)	4,341.99
		Line 13: Total Expenditures	\$50 and under* (not listed above)	24.31
	Enter on page 1, line 4 →	Line 14: TOTAL EXPEND	ITURES IN THE PERIOD	4,366.3

^{*} 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
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Short				
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				-
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and t	under* (not listed above)	
		Line 14: TOTAL EXPENDIT	bould include only those expenditure	

^{*} 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
Jan 23, 2015	Edward & Sandra Giroux	21 Horman Rd North Billerica MA 01862	Registration fee for team event	125
Jan 23, 2015	Andrew & Maggie Deslaurier	32 Mt. Pleasant St. North Billerica MA 01862	Full Page ad in program from team event	200
		Line 15: In-Kind Contributions	over \$50 (or listed above)	325
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	0
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				325

^{*} 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
	Enter on page 1 line 7 ->	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	О