



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

DUE DATE JANUARY 20, 2016

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: JANUARY 1, 2015 Ending Date: DECEMBER 31, 2015

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

MICHAEL S. ROSA
Candidate Full Name (if applicable)
BOARD OF SELECTMEN
Office Sought and District
29 RIVERDALE ROAD BILLERICA, MA 01821
Residential Address
Telephone Number (optional): _____

COMMITTEE TO RELECT MIKE ROSA
Committee Name
DOROTHY L. PEARSØN
Name of Committee Treasurer
29 RIVERDALE ROAD BILLERICA
Committee Mailing Address
Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>2029.74</u>
Line 2: Total receipts this period (page 2, line 11)	<u>9020.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>11049.74</u>
Line 4: Total expenditures this period (page 3, line 14)	<u>1214.28</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>9835.46</u>
Line 6: Total in-kind contributions this period (page 4)	<u>450.00</u>
Line 7: Total (all) outstanding liabilities (page 4)	<u>- 6 -</u>
Line 8: Name of bank(s) used:	<u>LOWELL FIVE</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: Dorothy L. Pearson (Treasurer's signature) Date: Jan. 18, 2016

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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

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: Michael S. Rosa (Candidate's signature) Date: 1-18-16

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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/8/2015	ALDEN-HAUK, INC.	215 SALEMST. G WOBURN, MA. 01801	MAILING	429.28
11/11/2015	BILLERICA SCHOLARSHIP FOUNDATION (BOOK)		AD IN BOOK	200.00
	MASS. REPUBLICAN PARTY	BOSTON, MA.	DELEGATE TO CONVENTION	85.00
11/7/2015	PETER VIDEO		BAND FOR FUNDRAISER	500.00
Line 12: Total Expenditures over \$50 (or listed above)				1214.28
Line 13: Total Expenditures \$50 and under* (not listed above)				-0.-
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				1214.28

* 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
11/7/15	SOLOMON POST VFW.		VFW HALL DONATED.	- 0 -
11/7/15	O'CONNOR HARDWARE		2 CORDLESS DRILLS	- 0 -
11/7/15	STEPHANIE STOUTY		100. - GIFT CERTIFICATE	100.00
11/7/15	STEVE Smile's			350.00
			Line 15: In-Kind Contributions over \$50 (or listed above)	450.00
			Line 16: In-Kind Contributions \$50 & under (not listed above)	- 0 -
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	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
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	

Comm. to Elect MIKE ROSA

SCHEDULE A: RECEIPTS

PAGE 1

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)
10/11/2015	ALPINE PRECISION 153 RAINBOWAY RD. No. B.I.	100.00	
11/4/15	RICHARD CORSETTI BMC P.O. BOX 60 PINEHURST	100.00	
	ROSEMARY & JOHN DEFINNE 235 DAE ST. No. ANDOVER	140.00	
	TIPPINIL FARMER	300.00	FARMER EXCAVATION OWNER
	MIKE FLYNN 13 MEADE RD, BILLERICA	100.00	
	BR. AN & KERRI GAGNON 132 HIGH ST. No. B.I.	100.00	
	W. LIAM HADDEA 12 DIENCH P.O. BILLERICA	75.00	
	MARTIN KAZANTIAN CHARLOTE No. SAFFORD	100.00	
	MIRON KAZANTIAN 932 OCEANBLVD. HAMPTON N.H.	100.00	
	ROBERT LAVERGUE 46 BRIDLE RD. BILLERICA	100.00	
	B & J LOMBARDO 9 EUBAR CIR. BILLERICA	100.00	
	MARC LOMBARDO 9 EUBAR CR. BILLERICA	100.00	

Line 9: Total Receipts over \$50 (or listed above) 1415.00

Line 10: Total Receipts \$50 and under* (not listed above) 1875.00

Line 11: TOTAL RECEIPTS IN THE PERIOD **3290.00**

← 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.

COMM. TO ELECT MIKE ROSA 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)
11/4/15	DONALD & GLENDA LOVEGROVE 11 KENSINGTON DR. Bill.	200.00	BOTH RETIRED
	NATALIE MACDONALD 7 SPRINGWELL RD. Bill.	60.00	
	CLAIRE MARCHESI 45 ELIZABETH RD., Bill.	100.00	
	MARCO HE LAW FIRM (410) 45 HERRIMACK ST. LOWELL	100.00	
	JIM MARSHALL POND ST. BILLERICA	100.00	
	BRITANY & RICHARD MOORE SILVERBIRCH RD. Bill.	120.00	
	JARED MOORE 10 OLD RD. DEACUS, MA	100.00	
	JEFF MOORE 10 SILVERBIRCH RD. Bill.	100.00	
	MAUREEN O'BRIEN 27 W. HARRIS ST. WALTHAM 02451	60.00	
	HELEN POTTER 184 HIGH ST. NO. BILLERICA	150.00	
	RETIRED PUBLIC EMPLOYEES 11 BEACON ST. #309 BOSTON, MA. 02108-3017	300.00	
	DAN TURCO - 4 MIADON CIR., ANDOVER, MA. 01810	200.00	
Line 9: Total Receipts over \$50 (or listed above)	1590.00		
Line 10: Total Receipts \$50 and under* (not listed above)	1604.00		
Line 11: TOTAL RECEIPTS IN THE PERIOD	3194.00		← 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.

Commi. to Elect Mike
Rosa

SCHEDULE A: RECEIPTS

PAGE 3

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)
	ANTHONY VENTRESCA 31 ACCIDAN ST. Bill.	100.00	
	KELLEY WALTON 195 Fox Hill Rd. BURLINGTON VT 05403	95.00	
	PG. 1	3290.00	
	PG. 2	3194.00	
	PG. 3	2536.00	
		9020.00	TOTAL

Line 9: Total Receipts over \$50 (or listed above)	195.00
Line 10: Total Receipts \$50 and under* (not listed above)	2341.00
Line 11: TOTAL RECEIPTS IN THE PERIOD	2536.00

← 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.