

GREENFIELD, MASS

2019 SEP -3 PM12: 15

OFFICE OF THE
CITY CLERK



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

GREENFIELD, MASS

Commonwealth

2019 AUG 29 PM 4: 32

File with: City or Town Clerk of Election Commission

Fill in Reporting Period dates: **OFFICE OF THE CITY CLERK** Beginning Date: 01/01/2019 Ending Date: ~~08/31/2019~~ 8/31/2019

Type of Report: (Check one)

- 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

John Bottomley
Candidate Full Name (if applicable)

Precinct 4 Councillor

Office Sought and District

63 Haywood Street Greenfield, MA 01301
Residential Address

E-mail: maryc7700@yahoo.com

Phone # (optional): _____

Committee to Elect John Bottomley Precinct 4 Councillor
Committee Name

Mary Chicoine
Name of Committee Treasurer

254 Davis Street Greenfield, MA 01301
Committee Mailing Address

E-mail: maryc7700@yahoo.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	460
Line 3: Subtotal (line 1 plus line 2)	460
Line 4: Total expenditures this period (page 5, line 14)	80.71
Line 5: Ending Balance (line 3 minus line 4)	379.29
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Greenfield Savings 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: Mary Chicoine, Treasurer (Treasurer's signature) Date: 08/29/2019

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 that are not otherwise disclosed in this report.

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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 08/29/2019

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)
08/05/2019	Ayers, Glen 254 Davis Street Greenfield, MA 01301	50	Retired
08/05/2019	Bottomley, John 63 Haywood Street Greenfield, MA 01301	200	Professor
08/22/2019	Bottomley, Robert 1604 Dayton Drive Janesville, WI 53546	100	Unemployed
08/05/2019	Chicoine, Mary 254 Davis Street Greenfield, MA 01301	50	Retired
08/19/2019	Chicoine, Mary 254 Davis Street Greenfield, MA 01301	10	Retired
08/19/2019	Pam Parmakian 53 Haywood Street Greenfield, MA 01301	50	Director, AHA
Line 9: Total Receipts over \$50 (or listed above)		460	
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		460	← 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.

(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
08/23/2019	ActBlue Massachusetts	PO Box 441146 Somerville, MA 02144	Online fund raising platform - service charge	6.33
08/23/2019	Copycat Print Shop	180 Main Street Greenfield, MA 01301	Brochure printing	74.38
Line 12: Total Expenditures over \$50 (or listed above)				80.71
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				80.71

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



GREENFIELD, MASS

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

AUG 30 PM 2: 36

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: _____ Beginning Date: _____ Ending Date: _____

Type of Report: (Check one)

8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Jean Walsh Wall
Candidate Full Name (if applicable)

School Committee
Office Sought and District

40 High St., Greenfield 01301
Residential Address

E-mail: jeanwall1313@gmail.com

Phone # (optional): _____

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	_____
Line 2: Total receipts this period (page 3, line 11)	\$ 200
Line 3: Subtotal (line 1 plus line 2)	_____
Line 4: Total expenditures this period (page 5, line 14)	\$ 200
Line 5: Ending Balance (line 3 minus line 4)	-0-
Line 6: Total in-kind contributions this period (page 6)	\$ 200
Line 7: Total (all) outstanding liabilities (page 7)	_____
Line 8: Name of bank(s) used:	_____

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: _____

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 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: Jean Walsh Wall (Candidate's signature) Date: Sept. 30, 2019

SCHEDULE A: RECEIPTS

INITIAL REPORT: Report any receipts received before appointing the depository bank

OTHER REPORTS: You may omit schedule A information, as this has previously been disclosed on the reports filed by your depository bank. However, you must summarize your receipts on lines 9 - 11.

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
Line 9: Total receipts in excess of \$50				Enter on page 1, line 2.
Line 10: Total receipts \$50 and under				
Line 11: TOTAL RECEIPTS IN THE PERIOD				

SAVINGS ACCOUNT INFORMATION

Are there any campaign funds on deposit in savings accounts/CDs etc.? No (go to page 3) Yes

If yes, complete the following:

Name(s) of Bank(s) and/or CDs	Amount in account/CD etc.
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
SAVINGS ACCOUNT/CD TOTAL:	\$ _____

All funds held in savings accounts, CDs etc. should be included in line 5, (ending balance) on page 1.

SCHEDULE B: EXPENDITURES

INITIAL REPORT: Report any expenditures made before appointing the depository bank.

OTHER REPORTS: You may omit schedule B information, as this has previously been disclosed on the reports filed by your depository bank. However, you must summarize your expenditures on lines 12 - 14.

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.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
Enter on page 1, line 4			Line 12: Expenditures over \$50		
			Line 13: Expenditures \$50 and under		
			Line 14: TOTAL EXPENDITURES		

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

In-kind contributions are not reported by a depository bank. You must report all in-kind contributions for the reporting period on this form (or attached sheets). 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 contributor has given an aggregate amount of \$200 or more in a calendar year, the contributor's occupation and employer must also be reported.

This page may be copied if additional pages are required to report all expenditures or all in-kind contributions. Please include your committee name, CPF ID# and a page number on each page.

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)		

SCHEDULE E: DISCLOSURE OF ASSETS STATEMENT

All candidates and committees must fill in part A or part B.

Part A:

No assets* were acquired or disposed of by this candidate/committee during the period covered by this statement.

Part B:

Assets acquired: List all assets acquired since the committee last filed this statement. If this is the first Schedule E you have filed, list all assets.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value

Assets disposed of: List all assets sold, traded or transferred during the reporting period covered by this statement.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	Disposition Value Attach statement of how value is determined.

Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.

* An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.

This page may be copied if additional pages are required to report all liabilities or assets. Please include your committee name, CPF ID# and a page number on each page.



Account # 1637-6289-6232

Order Details | Order # W69CG-G5A73-0G2

Order Date: 8/22/2019 11:07 AM

Estimated Date of Arrival: 8/30/2019

Order Status: **Processing**

Shipping Address

Verne Sunde
81 Barton Rd.
Greenfield, MA 01301
United States of America
4133256501

[Edit Shipping Address](#)

Billing Address

Verne Sunde
81 Barton Rd.
Greenfield, MA 01301
United States of America
4133256501

Delivery Speed

Standard

Payment Information



****9974

Exp. 5/2020

Order Total

Product Total \$88.23

You Saved 33% (\$42.77)!

Shipping & Processing
Standard - Est. Arrival Aug 30 \$17.99

Sales Tax \$6.63

You Paid: **\$112.85**

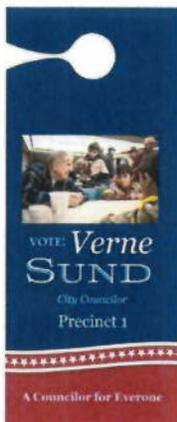
VistaprintCash™

✓ **Redeemed** - \$10.00 | Cash ID: POHK-4308

1 Item(s)

[Cancel Items](#)

[Res](#)



[Edit Your Design](#)

Large Door Hangers

Status: **Processing**

Qty 750

Base Price ~~\$131.00~~ **\$88.23**

Item Total * **\$88.23**

*State sales tax is required on this item.

PROMO APPLIED: OUR BEST SALE! 55% OFF YOU ENTIRE ORDER | LIMITED TIME!

Order Details

Order Number: 75700801 Order Date: 4/4/2019 Payment Status: Complete

Billing Information:

Name: VERNE SUND
Address: 81 BARTON RD
City: GREENFIELD Country: United States State: MA Zip Code: 01301

Shipping Information:

Name: VERNE SUND
Address: 81 BARTON RD
City: GREENFIELD Country: United States State: MA Zip Code: 01301-9725
Shipping Method: UPS Ground

Contact Information:

Email Address: isaacmass@gmail.com
Phone Number: 413-325-6501

Order Items

Qty	Item	Price	Item Total
50	Custom Sign -- (Sign ID: 863223729) 18" x 24" Corrugated Plastic Two-Sided, 2 colors	\$6.61	\$330.50

Payment Information:

Card Type: MasterCard
Card Number: XXXXXXXXXXXXX9974
Expiration Date: 5 / 2020
Payment Status: Complete

Subtotal: \$330.50
Promotional: (\$186.52)

Shipping: \$57.43
Tax: \$12.59

Total: \$214.00

Shipping/Tracking Status

Shipping Status: Pending
Tracking Numbers:

Package Tracking (by package):

4.9 ★★★★★
Google
Customer Reviews

This email is your receipt, so please print out a copy for your records. We'll email you a shipping notification as soon as your order is carefully packaged and on its way. If necessary, we'll send you additional shipping updates about your order.

Shipping:	\$57.43
Tax:	\$12.59
<hr/>	
Total:	\$214.00

Questions or concerns? Contact us at: service@signsonthecheap.com or 1-866-661-9239

This email was sent by: **SignsOnTheCheap.com**
11525A Stonehollow Dr., Suite 100 Austin, TX, 78758, USA



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

GREENFIELD, MASS

Commonwealth
of Massachusetts

2019 SEP -4 AM 11: 04

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 9/10/2019 Ending Date: 8/30/2019

OFFICE OF THE
CITY CLERK

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

Philip W. Elmer
Candidate Full Name (if applicable)

City Council, At Large
Office Sought and District

28 Chestnut Hill
Residential Address

E-mail: ped@mac.com

Phone # (optional): 347-404-0090

Citizens for Phil Elmer
Committee Name

Christopher Sikes
Name of Committee Treasurer

28 Chestnut Hill, Greenfield
Committee Mailing Address

E-mail: ped@mac.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	2778.10
Line 3: Subtotal (line 1 plus line 2)	2778.10
Line 4: Total expenditures this period (page 5, line 14)	2778.10
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	TD 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: Christopher Sikes (Treasurer's signature) Date: 8/30/19

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 that are not otherwise disclosed in this report.

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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 9/4/19

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
6/10/2019	WHAT	81 Woodward St. Greenfield	40 campaign radio ads	400
6/14/2019	CopyCat Print Shop	180 Main St. Greenfield	100 campaign postcards	105.19
6/17/2019	WHAT	81 Woodward St. Greenfield	Table for tag sale	150
6/17/2019	CopyCat Print Shop	180 Main St. Greenfield	500 campaign postcards	178.5
6/18/2019	Staples	259 Mohawk Trail, Greenfield	Elmer's GlueSticks	55.21
6/26/2019	WHAT	81 Woodward St. Greenfield	12 radio ads, tag sale	150
8/7/2019	CopyCat Print Shop	180 Main St. Greenfield	50 lawn signs	637.50
8/12/2019	CopyCat Print Shop	180 Main St. Greenfield	100 lawn signs	1020
Line 12: Total Expenditures over \$50 (or listed above)				2696.40
Line 13: Total Expenditures \$50 and under* (not listed above)				81.70
Line 14: TOTAL EXPENDITURES IN THE PERIOD				2778.10

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.



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 9/10/2019 Ending Date: 8/30/2019

Type of Report: (Check one)

8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Philip W. Elmer
Candidate Full Name (if applicable)
City Council, At Large
Office Sought and District
3 Chestnut Hill
Residential Address
E-mail: ped@mac.com
Phone # (optional): 347-404-0090

Citizens for Phil Elmer
Committee Name
Christopher Sikes
Name of Committee Treasurer
28 Chestnut Hill, Greenfield
Committee Mailing Address
E-mail: ped@mac.com
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	2778.10
Line 3: Subtotal (line 1 plus line 2)	2778.10
Line 4: Total expenditures this period (page 5, line 14)	2778.10
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	TD Bank

Signature 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 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.

Under the penalties of perjury: Christopher Sikes (Treasurer's signature) Date: 8/30/19

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

Identify 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, and any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

Identify 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 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 candidate in accordance with the requirements of M.G.L. c. 55.

Under the penalties of perjury: [Signature] (Candidate's signature) Date: 8/30/19



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
Massachusetts

File with: City or Town Clerk or Election Commission

In Reporting Period dates: Beginning Date: 9/10/2019 Ending Date: 8/30/2019

Type of Report: (Check one)

8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Phil W. Elmer
Candidate Full Name (if applicable)
Council, At Large
Office Sought and District
28 Chestnut Hill
Residential Address
E-mail: ped@mac.com
Phone # (optional): 347-404-0090

Citizens for Phil Elmer
Committee Name
Christopher Sikes
Name of Committee Treasurer
28 Chestnut Hill, Greenfield
Committee Mailing Address
E-mail: ped@mac.com
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	2778.10
Line 3: Subtotal (line 1 plus line 2)	2778.10
Line 4: Total expenditures this period (page 5, line 14)	2778.10
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	<u>TD Bank</u>

Committee Treasurer: 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.
for the penalties of perjury: Christopher Sikes (Treasurer's signature) Date: 8/30/19

CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)
with Committee
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. I have not received any contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.
without Committee
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 candidate in accordance with the requirements of M.G.L. c. 55.
[Signature] (Candidate's signature) Date: 8/30/19



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

GREENFIELD, MASS

Filed with the Town Clerk for Election Commission

Fill in Reporting Period dates: Beginning Date: 7/9/19 Ending Date: 8/30/19

OFFICE OF THE CITY CLERK

Type of Report: (Check one)

- 8th day preceding preliminary
- 8th day preceding election
- 30 day after election
- year-end report
- dissolution

Candidate Full Name (if applicable): _____

Office Sought and District: _____

Residential Address: _____

E-mail: _____

Phone # (optional): _____

Greenfield CPR-PAC
Committee Name

David Cohen
Name of Committee Treasurer

FCCPR PO Box 216 Greenfield MA 01302
Committee Mailing Address

E-mail: info@fccpr.us

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	_____
Line 2: Total receipts this period (page 3, line 11)	1,005.00
Line 3: Subtotal (line 1 plus line 2)	1,005.00
Line 4: Total expenditures this period (page 5, line 14)	507.23
Line 5: Ending Balance (line 3 minus line 4)	497.77
Line 6: Total in-kind contributions this period (page 6)	_____
Line 7: Total (all) outstanding liabilities (page 7)	_____
Line 8: Name of bank(s) used:	Greenfield Savings 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: David J. Ihlen (Treasurer's signature) Date: 8/29/19

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 that are not otherwise disclosed in this report.

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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____ (Candidate's signature) 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.

(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)
7/12/19	DAVID Cohen 335 Green River Rd Gn Flb ma 01301	200.00	Retired
8/17/19	Mike Fadel 24 Franklin St Gn Flb ma 01301	100.00	
8/5/19	Robert Gilmore 16 BARBER AVE Gn Flb MA	500.00	Retired
 			

Line 9: Total Receipts over \$50 (or listed above) 800.00

Line 10: Total Receipts \$50 and under* (not listed above) 205.00

Line 11: TOTAL RECEIPTS IN THE PERIOD 1,005.00

← 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.

