

# Form CPF M 102-0: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

City or Town of:	BERLIN						Please p	rint or type all information, except signatures
Reporting Perio	d: Beginning:	(MM/D	D/YYYY)		Ending:	12/31/2017	(M	M/DD/YYYY)
Type of Report: (	Check One) ding preliminary/primary	☐ 8th day preceding	election [	30th day follow	ing election (tow	vn or special)		h day of January (Year-End report)
Pursuant to M.G.  1. I certify th  2. I certify th	L. Chapter 55: at I am a candidate for or cur	ently hold Municipal (atributions, made any e	Office.				, and do	not have a campaign fund in existence.
DATE	PRINT NAME	Signed	SIGNATU I under the pena	JRE alties of perjury		NTIAL ADDRESS et and Number)	S	OFFICE SOUGHT
1/3/18	Timothy G. Pierce				2 Village Lan	ie		Constable
	Judith Christensen				71 Pleasant S	t.		Trustee of Trust Fund
1/2/18	Jane L. Sawyer	Jan	e LJa	wyer	7 Central St.			Trustee of Trust Fund
	Ruth A. Wheeler				39 Sawyer H	ill Rd.		Cemetery Commissioner
1/23/18	Robert H. Guild, Jr.	Roler	H Dul	d Jr.	35 Randall R	d.		Cemetery Commissioner
	Janet Lamy			*	102 Derby Ro	d.		Library Trustee
1/2/18	Judith Rothbard Tate		2	>	88 Brook Lar	ne		Library Trustee
	Timothy H. Wheeler	411	Jan Xa	tella	240 Pleasant	St.		Planning Board
	Janet W. Campbell	1/1	well i	un phell	285 Pleasant	St.		Planning Board
	Jay Teich		111	2	220 Sawyer I	Hill Rd.		Planning Board
	Ronald L. Vavruska	A	W X.Va	rech	30 Brook Lar	ne		Planning Board
	R. Thomas Sanford, Jr.		NY	~	425 Sawyer I	Hill Rd.		Planning Board



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City or Town of:	BERLIN			Please print or type all information, except signatures.
Reporting Perio		(MM/DD/YYYY)	Ending: 01/31/2017	(MM/DD/YYYY)
Type of Report: (		8th day preceding election 30th day follow	ing election (town or special)	■ 20th day of January (Year-End report)
2. I certify th	at I am a candidate for or currently	outions, made any expenditures, or incurred any oblig		
DATE	PRINT NAME	SIGNATURE Signed under the penalties of perjury	RESIDENTIAL ADDRESS (Street and Number)	S OFFICE SOUGHT
12/13/17	Eloise E. Salls	Elvier 9. Salls	317 Randall Rd.	Town Clerk
1/2/18	Barry W. Eager	Bam N Eagr	51 South St.	Moderator, Cemetery, Tr. of Trust F.
	Dennis A. Fearebay	Verm tearilier	39 Walnut St.	Town Treasurer
	Richard Sardell	And Scriched	43 Baker Rd.	Collector of Taxes & Town Coll.
	Kevin Pond	Kein Pond	20 Crosby Rd.	Assessor
	Douglas J. Coldwell	· Janks Colivell	4 Larkin Rd.	Assessor
	David G. Pierce	Outin	143 Lyman Rd.	Assessor
	Robert V. Williams		159 Linden St.	Constable
	Angela Yildiz	angel Ville	5 Marlboro Rd.	Berlin School Committee
	Clifton O. LaPorte	allow Fotoste	201 Gates Pond Rd.	Berlin School Committee
	Linda G. Ryan	P. G. Fyar	255 Central St.	Assabet School Committee
	Edward Gault	3	29 Village Lane	Berlin School Committee



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City or Town of:	BERLIN					Please print or t	type all information, except signatures.
Reporting Perio	od: Beginning:			Ending:	12/31/2017	(10/00/5)	
L		(MM/DD/Y	YYY)			(MM/DD/Y	111)
Type of Report: (					• 1)	E 2011 1	CI (V F. I amout)
8th day prece	eding preliminary/primary	8th day preceding elec	ction 30th day follo	owing election (town	n or special)	≥ 20th day o	of January (Year-End report)
2. I certify th	nat I am a candidate for o <mark>r cur</mark>	ntributions, made any expe	ce. enditures, or incurred any o	bligations during this	s reporting period	, and <mark>do not hav</mark>	ve a campaign fund in existence.
DATE	PRINT NAME	Signed un	SIGNATURE ader the penalties of perjury		NTIAL ADDRESS t and Number)	S	OFFICE SOUGHT
1/2/18	Paul D. Mikelk	Pen	20/1202	119 Carter St.		Board	l of Health
	Robert L. Wheeler	Role	of Whele	32 West St.		Board	l of Health
	Susan D. Reguera	Sun	e legua	143 Randall R	d.	Board	l of Health
	Thomas Andrew	8		11 Pleasant St		Selec	tman
	Christine Keefe	Chris	Time Kalle	20 Bailey Rd.		Selec	tman
	Lisa Wysocki	Les	~ Wysocki	133 Derby Rd	•	Selec	tman
			<i>J</i> 3				



Signed under the penalties of perjury:

## Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 5	/29/2017 Ending Date: 12/31/2017
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election	30 day after election  year-end report dissolution
CHARLENE POSE DI CALOCERO  Candidate Full Name (if applicable)  LIBRARY ROSSE BELLIN BATE SOURE, 2 MOTORSE  Office Sought and District  56 VICLAGE CT., BEELIN, MA 01503  Residential Address  E-mail: Colica og Carrail.com  Phone #(optional): (978) 838-2340	Di CALCGERO COMMITTE  Committee Name  DAVID SPANASEL  Name of Committee Treasurer  P.O. Box DO, LANCASCER MA 01533  Committee Mailing Address  E-mail: david spanage   Ecommost net  Phone # (optional): (938) 368-0075
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	1,218.61
Line 2: Total receipts this period (page 3, line 11)	1,691.00
Line 3: Subtotal (line 1 plus line 2)	2,909,61
Line 4: Total expenditures this period (page 5, lin	ne 14) /, 828.13
Line 5: Ending Balance (line 3 minus line 4)	1,081.48
Line 6: Total in-kind contributions this period (pa	age 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: Werkes	CREDITUNION
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the bes activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be Candidate with Committee and no activity independent of the committee	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date: 1/6/2018  ox only)
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	e best of my knowledge and belief, a true and complete statement of all campaign finance ecordance with the requirements of M.G.L. c. 55. I have not received any contributions, g period.
Candidate without Committee OR Candidate with independent activity filing s  I certify that I have examined this report including attached schedules and it is, to th finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of th	e best of my knowledge and belief, a true and complete statement of all campaign s, in-kind contributions and liabilities for this reporting period and represents the

#### **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)
11/6/2017	Cason, Janet 40 West brack Rd., Northborough 1993	\$100	
11/6/2017	Factor Daniel 11 Dovis Road #15, Acton, MA 01718	\$80	
10/26/2017	Fine Rebecca 102' La Lue Lare, Ed Brunswick N. 08316	\$100	
11/30/2017	Fartune, Nathanael 152 Westkrade Rd., Whatek, M. 81093	\$200	Protessor Smith College
11/30/2017	Mess Sharon 16 Euthon Circle, Showsbury, MA	*100	
11/27/2017	Murphy, Stephen 13 Intervaled, Wellesley, WA	\$100	
10/6/2017	Palmer Jean P.O.Bsx 218, Lincoln, MA 017/3	375	
10/31/2017	Palmer-Soure Joyce 152 West brock Pol 5 Destricted MA 01373	\$200	Professor Smith College
10/31/2017	Spanagel, David 282 Goss Lone, Loncaster NA 0523	*136	
11/2/2017	Yarden, Elie 143 Pleasant St. Gt. 20, Combis de	3200	Musician Self-employed
Line 9: Total Rece	ipts over \$50 (or listed above)	<b>*</b> 1,291	
Line 10: Total Rece	eipts \$50 and under* (not listed above)	±400	
	RECEIPTS IN THE PERIOD	7,691	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)
	(aspiration instrugit equition)		(as contradiction of page of more)
		L	
ina O. Tatal Da	into over \$50 (or listed share)		
Line 9: 10tal Rece	ipts over \$50 (or listed above)		
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL I	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
		0 1: 10 -1	Id include only those receipts not itemized above

<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.)

report all expenditures. Please include your committee name and a page number on each page.)  To Whom Paid						
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
5/3/2017	Nation Builder	5205, Grand Ave., 2 MPHan Los Angeles, CA 90071	Website monthly tee	*29.∞		
6/30/2017	Norkan Builder	.,	(1)	29.00		
7/31/2017	Nation Builder	1.	, ,	129,00		
8/30/2017	Nation Builder	11	t e	*29.00		
10/2/2017	Notion Builder	11	K	329,€€		
10/30/2017	Nation Builder	) (		29.∞		
11/30/2017	Nation Builder	11	2 (	³Z7.∞		
11/24/2017	OfficeMax	199 Boston Post Rad Wat Mai larouch, MA 01752	Tape, Lubds, Andragues	3214.72		
10/18/2017	Quick Stop Printsing	340 Shrensbury St. Warcester, MAY 01604	2000 Business Gods	*132.8Z		
11/20/2017	Quick Stop Priviling	<b>3</b> •	100 Yard Signs, 50 Stands	\$525,94		
17/7/2017	Similar Mai Bisko	1175 Main Street Clinton, MA 01510	two trys of Food served at election night	3122.80		
11/24/2017	US Postal Service	260 Pleasent Shoet Berlin, MA 01503	Postege For Compaign Literature Mailings	\$190,20		
Arrivalisa milatare a c		Line 12: Total Expenditures ov	(see p.5)			
		Line 13: Total Expenditures \$50				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD						

<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		
12/5/2017	XIXCenter	19 Goter Skeet Berlin, MA 01503	Donaton to XIX Center location of election night reaption	°75.00		
	1	Line 12: Expenditures over \$5	0 (or listed above)	34,464,48		
		Line 13: Expenditures \$50 and	under* (not listed above)	\$ 363.65		
	Enter on page 1, line 4 →		TURES IN THE PERIOD should include only those expenditur	"1,828,13		

<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 6 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		
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND Co	ONTRIBUTIONS	

<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
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	