



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report
Office of Campaign and Political Finance

File with: Director
Office of Campaign and Political Finance
One Ashburton Place Rm. 411
Boston, MA 02108
(617) 979-8300

CPF ID# 13331
1/12/2016

Reporting Period: Beginning: 10/17/2015 Ending: 12/31/2015

Type of Report: 2015 Year-end report (MUN)

Galvin, Scott

Full Name of Candidate

Municipal Woburn

Office Sought/ District

**4 Foley Road
Woburn, MA 01801**

Residential Address

Galvin Committee

Committee Name

Gemma W. Martin

Name of Committee Treasurer

**202 Bonham Rd.
Dedham, MA 02026**

Committee Address

SUMMARY BALANCE INFORMATION

Ending balance from previous report:	\$22,355.75
Total receipts this period:	\$525.00
Subtotal:	\$22,880.75
Total expenditures this period:	\$1,888.77
Ending Balance:	\$20,991.98
Total inkind contributions this period:	\$0.00
Total outstanding liabilities:	\$38,362.23
Name of Bank Used:	

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.

<u>Date</u>	<u>Name and Residential Address</u>	<u>Amount</u>	<u>Occupation and Employer</u>
11/15/2015	MA & Northern NE Laborers' District Council Pol Action Comm 7 Laborers' Way Hopkinton, MA 01748	\$500.00	80479
Total Itemized Receipts:		\$500.00	
Total Unitemized Receipts:		\$25.00	
Total Receipts:		<u>\$525.00</u>	

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 over \$50 and under may be added together from committee records, and reported on line 13.

<u>Date</u>	<u>Name and Address</u>	<u>Amount</u>	<u>Purpose</u>
11/2/2015	Chick Montana Group, LLC 202 Bonham Rd Dedham, MA 02026	\$300.00	Accounting & Compliance services
11/2/2015	Chick Montana Group, LLC 202 Bonham Rd Dedham, MA 02026	\$3.92	Postage
12/2/2015	Chick Montana Group, LLC 202 Bonham Rd Dedham, MA 02026	\$300.00	Accounting and compliance services
12/2/2015	Chick Montana Group, LLC 202 Bonham Rd Dedham, MA 02026	\$1.68	Postage
11/15/2015	Galvin, Scott 4 Foley Rd Woburn, MA 01801	\$72.49	Reimbursement (See R-1)
12/2/2015	Galvin, Scott 4 Foley Rd Woburn, MA	\$250.00	Reimbursement (See R-1)
11/15/2015	Marco's Italian Coldcuts 389 Main St Woburn, MA 01801	\$160.50	Catering
10/28/2015	St Charles Educational Fund 3 Francis St Woburn, MA 01801	\$100.00	Donation
11/15/2015	Tanner Tavern 474 Main St Woburn, MA 01801	\$650.18	Catering
Total Itemized Expenditures:		\$1,838.77	
Total Unitemized Expenditures:		\$50.00	
Total Expenditures:		<u>\$1,888.77</u>	

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 the liabilities incurred during this reporting period.

<u>Date</u>	<u>To Whom Due</u>	<u>Amount</u>	<u>Purpose</u>
10/16/2015	Galvin, Scott 4 Foley Road Woburn, MA 01801	\$36,881.23	
10/16/2015	Scott Galvin 4 foley rd Woburn, MA 01801	\$1,481.00	
	Total Liabilities:	<u>\$38,362.23</u>	

Schedule R: Reimbursements

<u>Date</u>	<u>Reimbursee</u>	<u>Total Amount</u>
11/15/2015	Galvin, Scott	\$72.49
12/2/2015	Galvin, Scott	\$250.00



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Form CPF R1: Itemization of Reimbursements
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<u>Galvin, Scott</u>	<u>Galvin Committee</u>
<i>Individual Being Reimbursed</i>	<i>Committee Name</i>
<u>\$72.49</u>	<u>11/15/2015</u>
<i>Amount of Reimbursement</i>	<i>Date of Reimbursement</i>

<u>Date</u>	<u>Name And Address</u>	<u>Amount</u>	<u>Purpose</u>
11/2/2015	BJ's 85 Cedar St Stoneham, MA 02180	\$72.49	Food for Campaign Workers



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<u>Galvin, Scott</u> <i>Individual Being Reimbursed</i>	<u>Galvin Committee</u> <i>Committee Name</i>
<u>\$250.00</u> <i>Amount of Reimbursement</i>	<u>12/2/2015</u> <i>Date of Reimbursement</i>

<u>Date</u>	<u>Name And Address</u>	<u>Amount</u>	<u>Purpose</u>
11/20/2015	Lions Club PO Box 81 Woburn, MA 01801	\$250.00	Facility rental