



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY CLERKS OFFICE

2015 OCT 20 PM 8:48

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

Candidate Full Name (if applicable)

Office Sought and District

Residential Address

Telephone Number (optional):

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

| | |
|---|--|
| Line 1: Ending Balance from previous report | <input type="text" value="\$953.16"/> |
| Line 2: Total receipts this period (page 3, line 11) | <input type="text" value="10,475.00"/> |
| Line 3: Subtotal (line 1 plus line 2) | <input type="text" value="\$11,428.16"/> |
| Line 4: Total expenditures this period (page 5, line 14) | <input type="text" value="\$2,834.82"/> |
| Line 5: Ending Balance (line 3 minus line 4) | <input type="text" value="\$8,593.34"/> |
| Line 6: Total in-kind contributions this period (page 6) | <input type="text"/> |
| Line 7: Total (all) outstanding liabilities (page 7) | <input type="text" value="\$1,500.00"/> |
| Line 8: Name of bank(s) used: | <input type="text"/> |

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: Meghan Needham (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: _____ (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) |
|--|---|------------------|---|
| | See attached | | |
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| Line 9: Total Receipts over \$50 (or listed above) | | 7,075.00 | |
| Line 10: Total Receipts \$50 and under* (not listed above) | | 3,400.00 | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | 10,475.00 | ← 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.

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 |
|---------------------------|--|--|--|------------------|
| 05/16/15 | American Legion Hall | 194 Lexington Street Woburn, MA 01801 | Hall Rental | \$50.00 |
| 5/11/15 | Bank of America | PO Box 15019 Wilmington, DE 19886-5019 | reimbursement for mailing/ postcards | \$1346.78 |
| 07/22/15 | Blues for Veterans | Blues For Veterans Association P.O. Box 507 Woburn, MA 01801 | donation | \$100.00 |
| 07/22/15 | Boys and Girls Club Woburn | 1 Charles Gardner Lane Woburn, MA 01801 | donation | \$150.00 |
| 7/01/15 | Daily Times Chronicle | 1 Arrow Drive Woburn, MA 01801 | advertising | \$423.04 |
| 05/07/15 | Grand Theft Audio/Neil Porter | Stoneham, MA 02180 | band for event | \$375.00 |
| 5/11/15 | Great Mandarin Restaurant | 186 Cambridge Road #7 Woburn, MA 018010 | Food for event | \$300.00 |
| 4/03/15 | Woburn Lions Club | PO Box 81 Woburn, MA 01801 | ad book St. Patricks Day event | \$40.00 |
| 10/13/15 | Woburn Lion Club | PO Box 81 Woburn, MA 01801 | monster dash donation | \$50.00 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | Line 12: Total Expenditures over \$50 (or listed above) | |
| | | | Line 13: Total Expenditures \$50 and under* (not listed above) | |
| Enter on page 1, line 4 → | | | Line 14: TOTAL EXPENDITURES IN THE PERIOD | \$2834.82 |

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



Commonwealth
of Massachusetts

Form CPF R 1: Itemization of Reimbursements

Office of Campaign and Political Finance

CITY CLERKS OFFICE

2015 OCT 20 PM 8:48

WOBURN, MA 01801

Office of Campaign and Political Finance
One Ashburton Place, Room 411
Boston, MA 02108
(617) 979-8300

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

| | |
|--------------------------------------|---|
| | Date of Reimbursement: <input style="width: 90%;" type="text" value="May 11, 2015"/> |
| Name of Individual Being Reimbursed: | <input style="width: 95%;" type="text" value="Richard Haqqerty Credit Card Reimbursement via Bank of America"/> |
| Committee Name: | <input style="width: 95%;" type="text"/> |
| CPF ID Number (if applicable): | <input style="width: 20%;" type="text"/> Telephone Number (optional): <input style="width: 20%;" type="text"/> |

ITEMIZE EXPENDITURES IN EXCESS OF \$50

| Date Paid | Vendor Name | Vendor Address | Purpose of Expenditure | Amount |
|-----------|-------------------|--------------------------------------|------------------------|------------|
| 05/11/15 | Connolly Printing | 17B Gill Street Woburn, MA 01801 | Mailing | \$1,245.59 |
| 05/11/15 | VistaPrint | 95 Hayden Ave Lexington, MA 02421 | postcards | 101.19 |
| | | | | |
| | | | | |
| | | | | |

(Include items listed on Page 2) →

| | |
|--|--|
| Line 1: Expenditures in excess of \$50 (itemized above): | <input style="width: 95%;" type="text"/> |
| Line 2: Expenditures \$50 or under (not itemized): | <input style="width: 95%;" type="text"/> |
| Line 3: TOTAL AMOUNT REIMBURSED: | \$1,346.78 |

Signed under the penalties of perjury:

Meghan Needham
Signature of Candidate / Treasurer

Date:

Please prepare a separate report for each reimbursement check issued by the committee.

CONNOLLY

178 Gill Street, Woburn MA 01801 • 781-932-8885
ConnollyPrinting.com • 800-406-7206

Invoice

| | |
|----------|-----------|
| Date | Invoice # |
| 4/8/2015 | 10816 |

| |
|--|
| Bill To |
| Rich Haggerty 32 Leonard Street Woburn, Ma 01801 |

| |
|---------|
| Ship To |
| |

| | | | | | |
|----------|------------------------|-----------|-----|-----------------|--------|
| P.O. No. | Terms | Due Date | Rep | Ship Via | Woburn |
| | Mailings due in adv... | 4/10/2015 | KC | Del to Post Off | F.O.B. |

| Quantity | Item Code | Description | Price Each | Amount |
|----------|-------------|---|------------|---------|
| 1,131 | Invitations | #10 Invitation Mailing Package, addressed, postal prep & mailed, w/union bug (Window env, merged letter, reply card & reply env) Postage | 0.79 | 893.49T |
| 1,131 | Postage | | 0.26195 | 296.26 |

PAID by BOA

Thank You for doing business with Connolly Printing.

In the event the customer doesn't pay in accordance to the payment terms above, the customer agrees to pay a late charge of 1.8% per month of the total amount of any late payment. The customer also agrees to pay any collection expenses incurred to collect any unpaid amounts, including a reasonable attorney's fee due to litigation arising out of collection of any unpaid amounts owed by customer. Pricing assumes a 2% discount for cash or checks. The 2% cash discount does not apply to credit cards and will be added back.

Subtotal \$1,189.75

(6.25%) \$55.84

Total \$1,245.59

Payments/Credits \$0.00

Balance Due \$1,245.59

| | | |
|----------------|-----------------------------|--------------------------|
| Fax # | E-mail | Web Site |
| (781) 932-8544 | kevinc@connollyprinting.com | www.connollyprinting.com |

BOA
check
#201

Subject: Your Vistaprint Order Is Confirmed

Date: Wednesday, April 15, 2015 at 10:22 AM

From: Vistaprint <vistaprint@rtm.vistaprint.com>

Reply-To: Vistaprint <vistaprint-ctg1mecakaaaacuqezcjhzks45ajafbq@rtm.vistaprint.com>

To: Middlesex East middlesexeast@comcast.net

Conversation: Your Vistaprint Order Is Confirmed

Your Vistaprint Order Confirmation



[Add Vistaprint to your address book](#)

My Account:7698-7715-0998

THANK YOU FOR YOUR ORDER Your Order Number: **OHNJ9-B3A86-5D6** • [Track It](#)

Hi, Richard.

Your order will be on its way soon. Look for the shipping confirmation email in your inbox.

Questions? Visit our [help page](#) or [contact us](#) directly.

To check the status of your order at any time, [click here](#).

Here are your order details:

Order Date: **4/15/2015**

Delivery Option: **Economy**

You can expect to receive your order in 8 Business Days.

Payment Type : MasterCard

Card Number : 1720

Authorization Code : 06155Z

| Preview: | Description: | Qty: | Price: |
|-----------|---|--------------|-----------|
| Documents | | | |
| | Medium Postcard Item #: BF0-001 Share | 500 | \$90.00 |
| Options | | | |
| | Color Back Side Item #: 925-001 | - | \$24.00 |
| | Glossy Stock Item #: 957-001 | - | FREE |
| | Website Coupon Item #: 950-001 | - | (\$22.80) |
| | | Merchandise: | \$114.00 |
| | | Coupons: | (\$22.80) |

Shipping Charges: \$9.99
Tax: \$0.00
Total: **\$101.19**

BOA
Check
#201

Shipping To:

Richard Haggerty
32 Leonard Street
Woburn MA 01801
US

Billed To:

Richard Haggerty
32 Leonard Street
Woburn MA 01801
US

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Absolutely Guaranteed Every time. Any reason. Or we'll make it right.

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This email address is unmonitored, so please don't reply.
Offers expire 5/10/2015, at 11:59 PM (PT).

Limit one promo code per order. Savings will be reflected in your shopping cart. Discounts may vary by quantity and design and can't be applied to shipping and processing, taxes, subscription or design services, previous purchases or products on the Vistaprint Promotional Products site, unless otherwise specified. Additional fees may apply for shipping and processing, and taxes, unless otherwise noted. Free offers valid only on the lowest quantity of each product and not valid on more than 2 items per order.

Vistaprint may change or cancel this offer at any time. See website for details.

Vistaprint USA, Incorporated | 95 Hayden Avenue | Lexington, MA 02421

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