

Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Please print or type all information, except signature	20/2018		20th day of January (Year-End report)	do not have a campaign fund in existence.	OFFICE SOUGHT	Board of Selectures	WANDER MUST.	PLANKING BOARD	Library Pruster	Schol Committee	Parker 1 Rov.			
Ple	Ending: OH/o		30th day following election (town or special)	ligations during this reporting period, and	RESIDENTIAL ADDRESS (Street and Number)	18 Cretard Hill Rd	1401 1771870N 2D.	224 OCO LITTETON RO.	373 Stow Rosel	282 stowed	213 Lorderson, Pd.			
	3/06/10/10 MMDDVYYYY		Weth day preceding election 30th day foll	Municipal Office. made any expenditures, or incurred any ob	Signed under the penalties of perjury	L'Estrallac	OKON	15 Mos	Small	hnex	Man Later			
nof: HARVARD	Period: Beginning: 6	Type of Report: (Check One)	☐ 8th day preceding preliminary/primary	Pursuant to M.G.L. Chapter 55: 1. I certify that I am a candidate for or currently hold Municipal Office. 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence. 3. I certify that I do not have a political committee.	PRINT NAME	1 Lucy B Wallace	JEFFLERY K.BOUDREAU	STACIA DONAHUE	Jehnifer Maneil	Shannon Molloy	Day Thomas			
City or Town of:	Reporting Period:	Type of Rep	☐ 8th day p	Pursuant to N 1. I certi 2. I certii 3. I certiil	DATE	81/00/10	81/11/12	1/25/18	4/30/18	81/08/18	M20/14			



Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED HARVARD TOWN CLERK

City or Town of: April 20,2018 Beginning: Jan 1 - April 2018 **Ending:** Reporting Period: Type of Report: (Check One) 20th day of January (Year-End report) 30th day following election (town or special) 8th day preceding preliminary/primary 8th day preceding election Pursuant to M.G.L. Chapter 55: 1. I certify that I am a candidate for or currently hold Municipal Office. 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence. 3. I certify that I do not have a political committee. RESIDENTIAL ADDRESS SIGNATURE Signed under the penalties of perjury (Street and Number) OFFICE SOUGHT PRINT NAME 212 Stow Rd, Harvard Planning Board Frances Nickerson Frances H. nichesa 4/17/2018





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

City or Town of: Narvard	1	Please p	rint or type all information, except signatures.
Reporting Period: Beginning:	1 2018 MM/DD/YYYY)	Ending: 4 80 18	M/DD/YYYY)
Type of Report: (Check One)			AUDDO(1111)
8th day preceding preliminary/primary	preceding election 30th day follow	ring election (town or special) 20	th day of January (Year-End report)
Pursuant to M.G.L. Chapter 55: 1. I certify that I am a candidate for or currently hold M. 2. I certify that I have not received any contributions, r. 3. I certify that I do not have a political committee.	funicipal Office		
DATE PRINT NAME	SIGNATURE Signed under the penalties of perjury	RESIDENTIAL ADDRESS (Street and Number)	OFFICE SOUGHT
4/23/18 W. 11. Am Barton	Cub	328 STOWRD	MONERATUR

RECEIVED HARVARD TOWN CLERK

2018 APR 25 AM 8: 58



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

of Massachusetts			Plage	print or type all information, except signatures.
City or Town of:	HARVARD			
Reporting Period:	Beginning: JANU	MMDD/YYY) , 2018	Ending: APRIL 26	MADDAYYYY)
Гуре of Report: (Check C	One)			
8th day preceding pre	liminary/primary 🔀 8th day pr	ecceding election 30th day following	ng election (town or special) 20	th day of January (Year-End report)
I certify that I have	J. Jaka for an appropriate hold Ma	unicipal Office. ade any expenditures, or incurred any oblig	ations during this reporting period, and do	not have a campaign fund in existence.
	PRINT NAME	SIGNATURE Signed under the penalties of perjury	RESIDENTIAL ADDRESS (Street and Number)	OFFICE SOUGHT
H/20/12/SH	HAREN MCCARIN		908 BAREHILR	Board of Health
		The second control of		



Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED HARVARD TOWN CLERK

f Massachusetts City or Town of:	Harverek			D		2948-4	2008 of the Appeluli information, except signatures	1 27
Reporting Period:			01/01/2018 (MM/DD/YYYY)		Ending:	1/20/	2018 2018	11 1
);	ype of Report: (Check One) 3 8th day preceding preliminary/primary	X 8th day	8th day preceding election	30th day follow	30th day following election (town or special)		20th day of January (Year-End report)	1 1
G.L tha	ursuant to M.G.L. Chapter 55: 1. I certify that I am a candidate for or currently hold Municipal Office. 2. I certify that I have not received any contributions, made any expend 3. I certify that I do not have a political committee.	rrently hold I ontributions, 1	Municipal Office. made any expenditures, or in	ncurred any obli	gations during this reporting p	eriod, and do 1	usunt to M.G.L. Chapter 55: 1. I certify that I am a candidate for or currently hold Municipal Office. 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence. 3. I certify that I do not have a political committee.	
	PRINT NAME	[1]	SIGNATURE Signed under the penalties of perjury	(E ies of perjury	RESIDENTIAL ADDRESS (Street and Number)	RESS er)	OFFICE SOUGHT	1 1
	JC Ferguson		201		36 WILLER & D		Tree warden	
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RECEIVED HARVARD TOWN CLERK

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Massachusetts	7 11	Office of Campaig	Please	peint or type all information except signatures
by or Town of conting Per		04/01/18 MMDD/WY	Ending: 4/36	Millower
(图)对据通识符	(Check One)			20th day of January (Year-End report)
rstant to M.C	ceding preliminary/primary 8th di 5.1. Chapter 55; that 1 am a candidate for or currently hol		ollowing election (town or special)	Ou day of January (1 can river report)
2.1 certify	that I have not received any contribution that I do not have a political committee.	s, made any expenditures, or incurred any	obligations during this reporting period, and o	do not have a campaign fund in existence.
DATE	PRINT'NAME	SIGNATURE Signed under the ponalties of perju	RESIDENTIAL ADDRESS (Street and Number)	OFFICE SOUGHT
1/30	DAVIDA DAGA FLIE	MA	12 in Bree How Co	LIBRARY RUITEE
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	and the second of the second o			
		a) 不被政策指 定的 和		
	Land Company Assistance			
		The state of the s	The Land of August 100	



Form CPF M 102: Campaign Finance Report D TOWN CLERK Municipal Form

2018 APR 30 AM II: 21

Office of Campaign and Political Finance

of Massachusens	File with: City or Town Clerk or Election Commission						
Fill in Reporting Period dates: Beginning Date: Apr 1	2, 2018 Ending Date: Apr 21 2018						
Type of Report: (Check one)							
☐ 8th day preceding preliminary	30 day after election year-end report dissolution						
	A Better Way for Harvard Schools						
Candidate Full Name (if applicable)	Committee Name Louis Russo						
Office Sought and District	Name of Committee Treasurer 50 Stow Road, Harvard, MA 01451						
Residential Address	Committee Mailing Address						
E-mail:	E-mail: marinelli@psicorp.com						
Phone # (optional):	Phone # (optional):						
SUMMARY BALANC	CE INFORMATION:						
Line 1: Ending Balance from previous report	0						
Line 2: Total receipts this period (page 3, line 11)	850						
Line 3: Subtotal (line 1 plus line 2)	850						
Line 4: Total expenditures this period (page 5, lin	ne 14) 0						
Line 5: Ending Balance (line 3 minus line 4)	850						
Line 6: Total in-kind contributions this period (pa	nge 6) 0						
Line 7: Total (all) outstanding liabilities (page 7)	0						
Line 8: Name of bank(s) used: Main Street 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: (Treasurer's signature) 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 so I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of the	e best of my knowledge and belief, a true and complete statement of all campaign						
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.)

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
April 15, 2018	William Marinelli 50 Stow Road Harvard	\$250.00	Executive, PSI Corporation
April 15, 2018	Cynthia Russo 35 Lancaster County Road Harvard	\$250.00	Attorney, L. D. Russo, Inc.
April 15, 2018	Louis Russo 35 Lancaster County Road Harvard	\$250.00	Executive, L. D. Russo, Inc.
Para tana tana tana tana tana tana tana t			
Line 9: Total Rec	eipts over \$50 (or listed above)	750	J <u>L</u>
Line 10: Total Red	ceipts \$50 and under* (not listed above)	100	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	850	Enter on page 1, line 2



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

Office of Campaign and Political Finance

RECEIVED HARVARD TOWN CLERK

2018 APR 30 AM 9: 29
File with: City or Town Clerk or Election Commi

Fill in Reporting Period dates: Beginning Date: OI JA	WZO(8 Ending Date: 20APRZO)8
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):	Committee Name Alexandra Marssouris Name of Committee Treasurer P.O. Box 802 Harvard MA01451 Committee Mailing Address E-mail: Info@4652hes.org Phone # (optional):
SUMMARY BALANCE	INFORMATION:
Line 1: Ending Balance from previous report	NIA
Line 2: Total receipts this period (page 3, line 11)	3105,900
Line 3: Subtotal (line 1 plus line 2)	3105.90
Line 4: Total expenditures this period (page 5, line	14) 1039. 4100
Line 5: Ending Balance (line 3 minus line 4)	2065. 5/100
Line 6: Total in-kind contributions this period (page	e 6) 985, 19/100
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: St. Ma	ys credit Union
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind confinance activity of all persons acting under the authority or on behalf of this committee in activity of all persons acting under the authority or on behalf of this committee in activity of the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box of the penalties of the	ntributions and liabilities for this reporting period and represents the campaign coordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date:
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 b activity, of all persons acting under the authority or on behalf of this committee in accoincurred any liabilities nor made any expenditures on my behalf during this reporting p Candidate without Committee OR Candidate with independent activity filing separates.	est of my knowledge and belief, a true and complete statement of all campaign finance ordance with the requirements of M.G.L. c. 55. I have not received any contributions, eriod.
I certify that I have examined this report including attached schedules and it is, to the b finance activity, including contributions, loans, receipts, expenditures, disbursements, i campaign finance activity of all persons acting under the authority or on behalf of this contributions.	est of my knowledge and belief, a true and complete statement of all campaign
Signed under the penalties of perjury:	(Candidate's signature)

(Candidate's signature)

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.)

Occupation & Employer Name and Residential Address (for contributions of \$200 or more) Amount (alphabetical listing required) **Date Received** Audrey Bail 85 OakHill Rd Harvard MA 01451 Moven Caulfield 37, Woodside Rd HOWARD MA 01451 Jason Cole Try aven Ave Harvard MA Jennifer Cullie tarvard MA01451 Ion Daley BrownRd HENURAMA OYST Linda Dwignt 3 Eldridge Rd HOVAR MA 01451 Nathan Finch 165 Cod man HILRED HOVER NA 01457 Engineer, FormLabs Ben Franz Dale 128 LIHIETURA HOVAND MAOKST Realtor, Raveis Tammy Haschig 25 Chance St. Devens, MA 01434 Phoepe Hetton 75 west cott Rd Havard M 01451 Notan Kinayman 92 Slough Rd Harvyd MA DI457 KWA MINA POBOX 204 01467 HONANA SHILAVE, MA Line 9: Total Receipts over \$50 (or listed above) Line 10: Total Receipts \$50 and under* (not listed above) Line 11: TOTAL RECEIPTS IN THE PERIOD ← /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 A: RECEIPTS (continued)

	Name and Desidential Add	, ,	O D D D D D D D D D D D D D D D D D D D
Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/21/18	shann Moloy 282 stored Harvard MA-01457	50°	
3/26/18	stephen Molloy 282 Stowed Ferrard MA 01451	1,00000	- Software Architect Intuit
3/24/18	Michael Motor 131 Slough Rd Havarim 0451	500	
3/24/18	Krisha Helley MUNIST 113 S. Shaker Rd Harvard MA 01451	100 00	
3/24/18	JUSON Mary Redinger 121 AYET Rd HONSURD MA W457	200 20	Office Marase Redinso 360
3/24/18	RICHARD RUSHMURE 39 East Burethii Rd 39 East Burethii Rd		
3/21/18	Stu SKLAR 39 Soft Rd Hervard MA 01451	200	Sales, self-employed
3/24/18	Erika trenslay 10 Madigen Loule HOVVYE MA 01451	5000	
Line 9: Total Recei	pts over \$50 (or listed above)	2750	
Line 10: Total Rece	ipts \$50 and under* (not listed above)	355.0	
	RECEIPTS IN THE PERIOD	3105.	← Enter on page 1, line 2 d include only those receipts not itemized above

^{*} 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 expend	litures. Please include your comm	ittee name and a page number on	each page.)	
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4/3/18	Harvard Press	7 Still RIVERON HOVER AMA 01451	articleaccess	110,00
419/18	Hervard Press	2 Still RIVERED HOVERED MA	Advertisenes	440.00
4/14/18	Jen Wanell	273 Stowed Harvad MAN457	Reimbursunett For Posters	15721
4/17/18	stickermole	MINE	PINS	181.00
		Line 12: Total Expenditures or	ver \$50 (or listed above)	888,2
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	151,00
	Enter on page 1, line 4 →	1	FURES IN THE PERIOD should include only those expenditu	1039,46

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 above.

SCHEDULE B: EXPENDITURES (continued)

		TLE B: EXPENDITURES (co		
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
1				
				L. Indian
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and u		
		Line 14: TOTAL EXPENDIT , include them in line 12. Line 13 sl		

^{*} 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.

		D 116.1 1.11	Description of Contribution	Value
Date Received	From Whom Received*	Residential Address 9 West cott Rd	Description of Contribution	
4/13/18	Brad Besse Business Manage	Herrara 114	yard signs	324.99
11010	IDEX CORP.	0145	butters &	
3/23/18	Note FIRCH Software Ensurer Mattel	165 Colman Hill Rd 1-tarund MAO1451	magnets	238,00
2/16/18	Nake Finch software ensiner marker	165 Colman Hall Rd Harvard MADLYST	Domain nume	52.64
		Line 15: In-Kind Contribution	ns over \$50 (or listed above)	615.63
		Line 16: In-Kind Contribution	s \$50 & under (not listed above	369,5
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND	CONTRIBUTIONS	985.10

^{*} 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.

Page 6

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)				