

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

TOTAL CLERK RECEIVED

Massachumotts
le with: ity or Town Clerk or Election Commission Please print or type all information, except signatures.
Fill in dates: Month Date Year Reporting Period Beginning Lebruary 1, 2021 Ending May 7, 2021
Type of report: (Check one) Sth day preceding preliminary Sth day preceding election S0 day after election Syear-end report Sissolution
Peter Cunningham Full Name of Candidate (if applicable) Select Board Office Sought and District 44 Smith Street Residential Address Groton, M.A. 01450 Tel. No. (optional) Cunningham Committee Committee Name Mihran Keoseian Name of Committee Treasurer 44 Smith Street Committee Mailing Address Groton, M.A. 01450 Tel. No. (optional)
SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) SUMMARY BALANCE INFORMATION: \$ 0 \$ 675.00 \$ 437.50
Line 6: Total in-kind contributions this period (page 4) \$
Affidavit of Committee Tressurer: 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: Tressurer's signature (in ink) Date
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)
Affildavit 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.O.L. c. 55. I have not received any

'I certify that I have examined this report including atta	cased scategines and it is, to the pear of my knowledge and denier, a true and complete statement of an employed
finance activity, of all persons acting under the author	ity or on behalf of this committee in accordance with the requirements of M.O.L. c. 55. I have not received any
contributions, incurred any liabilities nor made any ex	penditures on my behalf during this reporting period.
Candidate without Committee OR Candidate w	th independent activity filing separate report
I would that I have everyined this report including atta	iched schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign
Connectivity including contributions loans recein	as expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the
campaign finance activity of all persons acting under the	ne authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
S	igned under the penalties of perjury:
0 0 0 1 -	ha 5/14/7021
Candidate signature (in ink)	ha 5 (14100)
Candidate signature (in ink)	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 themize 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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

number on each page.

umber on each page.	emperature and the second seco	A .	1	Occuration & Frankovan
Date Name and Residential Address		Amount		Occupation & Employer
Received (alpl	habetical listing required)		T	(for contributions of \$200 or more)
4/1/1 Steve	t Michelle Collette Pmill Hill Rd. Groton Keoseian Vell Rd. Groton d Marton Dunstable Rd. Groton arole Prest nigget Rd. Groton	1 1000	06	
100121 43 Wind	emill Hill Rd. Groton	100	00	
5/2/ Mihran	. Keoseian	lma	00	
1-171 34 Flac	rell Rd Groton	100		
4/201 Richard	d Marton	140	00	
12 605 Old	Punstable Kd. Groton	100		-
1/26/2 Art + Co	arole trest	/ -	00	
8 weyn	nisset Rd. Groton	100		AS-10-10-10-10-10-10-10-10-10-10-10-10-10-
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Line 9: Total receipts	in excess of \$50 (or listed above)	400	00	
	\$50 and under* (not listed above)	225	00	
	CEIPTS IN THE PERIOD	620	00	Enter on page 1, line 2
Line II: IVIAL RE	LEIR ROBIN RARE A LIBRATOR	line 0 1		should include only those receipts not item

[•] 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.

This page may be copied 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	Ame	ount
7/26/21	Just Yard Signs. Com	2235 Mercator Dr. Otlando, FL.	Campaign Signs	237	50
				0-12-2-4-17-2-4-4-17-18-18-18-18-18-18-18-18-18-18-18-18-18-	
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ANN WIS-TON YES THE TRANSPORTER AND					
maker#360.0008enhadro-Ver-14-1-1					

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The second secon					
bywaros (Caracas and Caracas a	·				
CONTRACTOR OF THE PARTY OF THE				· ·	
onderstanding of the second of		Line 12:	Expenditures over \$50	237	50
			Expenditures \$50 and under*		
	Enter on page 1, line 4		:TOTAL EXPENDITURES		50

^{*}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 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
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TATION STORY				
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		- A connecting of the connecti	Attended	
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	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 contribution is \$200 or more, you must also report the contributor's occupation and employer.

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	
	A STATE OF THE STA			
			A A A A A A A A A A A A A A A A A A A	
		TAY TO THE TOTAL THE TOTAL TO T	ATT	
•	Enter on page 1, line 7	Line 18: OUTSTANDING LIABILITIES (ALL)		

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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