



Commonwealth of Massachusetts

Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE MUNICIPAL FORM

Office of Campaign and Political Finance

File with: City / Town Clerk or Election Commission

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

CANDIDATE: Full Name: JOHN F. REILLY
 Residential Address: 50 ARROW TRAIL
 City / State / Zip: GROTON, MA 01450
 E-Mail Address: Jfrm sp@aol.com Phone #: 508-243-5037
 Party Affiliation: UN ENROLLED (If applicable)

OFFICE SOUGHT/PURPOSE:
 Title: SELECT BOARD
 District: _____

COMMITTEE: Name of Committee: THE COMMITTEE TO ELECT JOHN REILLY
 (The name of the committee must include the candidate's last name)
 Committee Mailing Address: 50 ARROW TRAIL
 City / State / Zip: GROTON, MA 01450 Phone #: 508-243-5037

OFFICERS:

Chairman: <u>RONALD KEOHAN</u> Residential Address: <u>232 KINE ST.</u> City / State / Zip: <u>EVERETT, MA 02149</u> Phone #: <u>617-763-5127</u>	Treasurer*: <u>STEVEN KREATZ</u> Residential Address: <u>62 HILLS FERRY RD.</u> City / State / Zip: <u>NASHUA NH 03064</u> Phone #: <u>603-440-3022</u> Email: <u>SKREATZ@YMAIL.COM</u> <small>*A public employee may not serve as treasurer of any political committee (see reverse).</small>
Other Officer/Title: _____ Residential Address: _____ City / State / Zip: _____ Phone #: _____	Other Officer/Title: <u>ASSISTANT TREASURER</u> Residential Address: <u>BONNIE CARTER B CONELANE</u> City / State / Zip: <u>GROTON MA 01450</u> Phone #: <u>781-820-2500</u>

(Complete and attach a Form CPF MA 101, if necessary, with other officers and finance committee, if any.)

I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

John F. Reilly Date: 5/9/19
Candidate's signature

I hereby accept the office of Treasurer of the above-named committee. I affirm that I am not a public employee as defined by M.G.L. c. 55, s. 13. I understand that: 1) I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election; 2) if after my acceptance of this office I become an appointed public employee, I must resign this position and notify OCPF of my resignation; and 3) a candidate may not serve as treasurer of the political committee organized on his/her behalf.

SIGNED UNDER THE PENALTIES OF PERJURY:

Steven Kreatz Date: 5/9/19
Treasurer's signature
Bonnie Carter - Asst Treasurer

I hereby accept the office of Chairman of the above-named committee.

SIGNED UNDER THE PENALTIES OF PERJURY:

Ronald Keohan Date: 5/9/19
Chairman's signature
7 MAY 2019



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates: Month Date Year Month Date Year
 Reporting Period Beginning FEB 4 2019 Ending MAY 3 2019

Type of report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

JOHN F. REILLY
 Full Name of Candidate (if applicable)
Select BOARD
 Office Sought and District
50 Arrow Trl Groton, MA 01450
 Residential Address

 Tel. No. (optional)

The Committee to Elect John Reilly
 Committee Name
STEVEN W. KIPATZ
 Name of Committee Treasurer
50 Arrow Trl Groton, MA 01450
 Committee Mailing Address

 Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 0
 Line 2: Total receipts this period (page 2, line 11) \$ 1,175
 Line 3: Subtotal (line 1 plus line 2) \$ 1,175
 Line 4: Total expenditures this period (page 3, line 14) \$ 0
 Line 5: Ending balance (line 3 minus line 4) \$ 1,175

Line 6: Total in-kind contributions this period (page 4) \$ 206.13
 Line 7: Total (all) outstanding liabilities (page 4) \$ 1,561.46
 Line 8: Name of bank(s) used Workers Credit Union

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:
Steven W. Kipatz 5/12/19
 Treasurer's signature (in ink) Date
Best Treasurer

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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:
John F. Reilly 5/12/19
 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 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.

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
3/29/19	Aurey Bryce 564 Longley Rd. Groton, MA 01450	100	00	
4/11/19	Joseph Bue PO Box 694 Groton, MA 01450	100	00	
4/18/19	Peter CUNNINGHAM 44 Smith St. Groton, MA 01450	25	00	
4/29/19	George & Mary Farchik 61 Paquawket Path Groton, MA 01450	200	00	RETIRED
3/29/19	Carl Flowers 1 DAN PARKER Rd. Groton, MA 01450	100	00	
4/6/19	Andrew McElroy 59 Mayfield Dr. Groton, MA 01450	250	00	Attorney SELF EMPLOYED
4/9/19	Susan NOBB 1 Boathouse Rd. Groton, MA 01450	100	00	
4/27/19	Arthur & Carole Frost 8 Weymisset Rd. Groton, MA 01450	200	00	Retires
4/25/19	George Eizer PO Box 1 Groton, MA 01450	50	00	
5/3/19	THOMAS & JOANNE SCHON 81 Paquawket Path Groton, MA 01450	50	00	
Line 9: Total receipts in excess of \$50 (or listed above)	1,175		00	
Line 10: Total receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD	1,175		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.

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	Amount	
			Line 12: Expenditures over \$50		
			Line 13: Expenditures \$50 and under*		
			Line 14: TOTAL EXPENDITURES	0	

Enter on page 1, line 4

*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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
3/22/19	RON KEOHAN Assessor, Town of SAUGER, MA	232 VINE ST. EVERETT, MA 02149	Bumper Stickers	\$206.13
Line 15: In-kind over \$50				206.13
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				\$206.13

Enter on page 1, line 6

* 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
4/15/19	JOHN F. REILLY	50 Arrow Trail GROTON, MA 01450	Reimbursement for YARD SIGNS & IF FRAMES	\$1,402.50
3/16/19 4/9/19	JOHN F. REILLY	50 Arrow Trail GROTON, MA 01450	4' x 8' BANNER (2)	126.15
4/13/19 4/30/19	JOHN F. REILLY	50 Arrow Trail GROTON, MA 01450	STRAPPING SCREWS, STAPLES for POILING SIGNS	32.81
Line 18: OUTSTANDING LIABILITIES (ALL)				\$1,561.46

Enter on page 1, line 7