



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

FORM CPFM 102
REVISED 2017

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures

MAY 16 A 9:03

Fill in dates:

Reporting Period Beginning Month FEB Date 16 Year 2022 Ending Month MAY Date 16 Year 2022

Type of report: (Check one)

8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

PETRONELLA GUTTRONSON
Full Name of Candidate (if applicable)
SCHOOL COMMITTEE GROTON
Office Sought and District
196 DUCK POND DRIVE
Residential Address
508 813 5499
Tel. No. (optional)

PETRONELLA GUTTRONSON
Committee Name
PETRONELLA GUTTRONSON
Name of Committee Treasurer
196 DUCK POND DRIVE
Committee Mailing Address
508 813 5499
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u> </u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>898.85</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>898.85</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>788.72</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>110.13</u>

Line 6: Total in-kind contributions this period (page 4)	\$ <u> </u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>788.72</u>
Line 8: Name of bank(s) used	<u>WORKERS CREDIT UNION, GROTON</u>

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:

[Signature]
Treasurer's signature (in ink)

5/16/22
Date

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:

[Signature]
Candidate signature (in ink)

5/16/22
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)
4/11/22	1095 Main STREET, DUNSTABLE 01827 AXON, SARA	50 00	
3/22/22	196 DUCK POND DRIVE (OPEN BANK GUTTRONSON, PETRONELLA Acc)	10 00	
4/7/22	GUTTRONSON, GENE (LOAN)	788 72	
5/2/22	53 OAK STREET, DUNSTABLE WETT, JENNIFER 01827	50 00	
4/29/22	WORKER CREDIT UNION (INTEREST)	0 13	
Line 9: Total receipts in excess of \$50 (or listed above)	788	72	
Line 10: Total receipts \$50 and under* (not listed above)	110	13	
Line 11: TOTAL RECEIPTS IN THE PERIOD	898	85	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	
4/7/22	BUSINESS J&S PRODUCTS	17 MAIN STREET, AYER, MA 01432	YARD SIGNS	743	00
2/18/22	STAPLES	289 N. MAIN ST, LECMINSTER, MA 01453	OFFICE SUPPLIES	45	72
Line 12: Expenditures over \$50				743	00
Line 13: Expenditures \$50 and under*				45	72
Line 14: TOTAL EXPENDITURES				788	72

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
			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

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
4/7/22	GUTTRONSON, GENE	196 DUCK POND DRIVE	YARD SIGNS	743.00
4/7/22	GUTTRONSON, GENE	196 DUCK POND DRIVE	OFFICE SUPPLIES	45.72
			Line 18: OUTSTANDING LIABILITIES (ALL)	788.72

Enter on page 1, line 7