

Signed under the penalties of perjury:

# Form CPF M 102: Campaign Finance OREPOTHAM Municipal Form CHY CLERK'S OFFICE

Office of Campaign and Political #19406 20 AM 9:02

ile with: ity or Town Clerk or Election Commission	,	RECEIVED	10/18/202
Reporting Period - Beginning: 9/1/2021	Ending:	10/18/2021	
Type of report: Pre-election			
John Frassica		Frassica Committee	
Full Name of Candidate		Committee Name	
School Committee		Arthur Bergeron	
Office Sought/ District	Name of Committee Treasurer		
225 Prospect Hill Rd Waltham, MA 02451	225 Prospect Hill Rd Waltham, MA Q2451		
Residential Address	***************************************	Committee Address	
SUMMARY BALANC  Ending Balance from previous rep		ATION \$3,038.81	
Total receipts this period:	,010.	\$875.00	
Subtotal:		\$3,913.81	
Total expenditures this period:		\$809.63	
Ending Balance:		\$3,104.18	
Total inkind contributions this	neriod:	\$0.00	
Total outstanding liabilities:	perrou.	\$0.00	
Name of bank(s) used: Waterto	own Savings	•	
Affidavit of Committee Treasurer:  I certify that I have examined this report, including attached belief, a true and complete statement of all campaign finance expenditures, disbursements, inkind contributions and liabilit finance activity of all persons acting under the authority or requirements of M.G.L. c. 55.  Signed under the penalties of perjury:  Treasurer's signature (in ink)	activity including ies for this repo	ng all contributions, loan:	s, receipts,
Affidavit of Candidate (check 1 box only) :			97 - FF 1889-1- B B.
I certify that I have examined this report, and attached sched true and complete statement of all campaign finance activity, this committee in accordance with the requirements of M.G.L. cany liabilities nor made any expenditures on my behalf during	ules and it is, to of all persons acts. 55. I have not	to the best of my knowledge cting under the authority of received any contributions	or on behalf of
Candidate without Committee OR candidate with indep I certify that I have examined this report and attached schedu a true and complete statement of all campaign finance activity disbursements, inkind contributions and liabilities for this r finance activity of all persons acting under the authority or requirements of M.G.L. c. 55.	les and it is, to including contri seporting period a	o the best of my knowledge butions, loans, receipts, and represents the campaign	and belief, expenditures,

10/19/2021

## 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.

Date	Name and Residential Address	Amount	Occupation and Employer
9/16/2021	Brenner, Collette & Richard 89 Florence Rd Waltham, MA 02453	\$100.00	
9/12/2021	Coughlan, Mary 25 Bacon St Waltham, MA 02451	\$100.00	
9/12/2021	Marcou, Randy and Nancy 10 Wimbleton Circle Waltham, MA 02451	\$100.00	
10/16/2021	Snyder, Mary and Robert 15 Wyola Prospect Waltham, MA 02451	\$100.00	
9/12/2021	White, Robert and Richard 75 Maravista Ave Waltham, MA 02451	\$100.00	
	zed Receipts mized Receipts pts	\$500.00 \$375.00 \$875.00	

#### 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 over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
9/9/2021	Signal Graphics Printing 441 Centre Street Newton, MA 02458	\$809.63	Campaign Flyers
	zed Expenditures emized Expenditures nditures	\$809.63 \$0.00 \$809.63	

### Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind 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. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description Occupation/Employer
Total Unit	ized Inkind Contributions emized Inkind Contributions nd Contributions	\$0.00 \$0.00 \$0.00	•

#### 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 the liabilities incurred during this reporting period.

Date To Whom Due

Amount Purpose

Total Outstanding Liabilities

\$0.00