



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 3/18/2020 Ending Date: 6/3/2020

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):

FRIENDS OF HTH BALLOT QUESTION

Committee Name

JOAnn Jones

Name of Committee Treasurer

5 Halsey Ave, Wellesley, MA 02482

Committee Mailing Address

E-mail: J.JoAnn.Jones@CommCast.Net

Phone # (optional): 781-235-5076

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

4026.61

Line 2: Total receipts this period (page 3, line 11)

428.00

Line 3: Subtotal (line 1 plus line 2)

4454.61

Line 4: Total expenditures this period (page 5, line 14)

3505.69

Line 5: Ending Balance (line 3 minus line 4)

948.92

Line 6: Total in-kind contributions this period (page 6)

175.00

Line 7: Total (all) outstanding liabilities (page 7)

Line 8: Name of bank(s) used: ROCKLAND SAVINGS

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: JoAnn Jones (Treasurer's signature)

Date: 6/5/2020

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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 that are not otherwise disclosed in this report.

Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/10/2020	Jonathan Cheek 8 Bryn Mawr Rd	123.00	
3/8/2020	Ethan Davis	50.00	
3/11/2020	Maria Gil-Santamaria	20.00	
3/5/2020	Michael Holiday	10.00	
3/13/2020	John Lanya	50.00	
3/13/2020	Ann Maria Lanya	50.00	
3/5/2020	Petro Lisowsky	50.00	
3/14/2020	Roy Switzgiles	50.00	
3/5/2020	Katherine Ziemer	25.00	

Line 9: Total Receipts over \$50 (or listed above) 123.00

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD 428.00

← 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	
3/6/2020	JO Hickson	298 Weston Rd Wellesley MA 02482	yard SIGNS	402	94
3/20/2020	JO Hickson	298 Weston Rd Wellesley MA 02482	yard SIGNS	274	83
3/10/2020	Richard Howe	9 OAKLAND ST Wellesley MA 02181	Wellesley Rd	200	00
3/2/2020	Mari Passanati	9 OAKLAND ST Wellesley MA 02181	Vista Print	1917	47
3/2/2020	Mari Passanati	9 OAKLAND ST Wellesley MA 02181	Staples "Yes" cards	701	17
3/17/2020	PayPal	12312 Port Grace LA Vista, NE 68128	Fee deduction	9	28
Line 12: Expenditures over \$50				3505	69
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES					

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
3/7/2020	Patrick Hayden Haycon LLC	35 Batchelder St Boston, MA	Swellesby Repor ad	175.00
Line 15: In-kind over \$50				175.00
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				175.00

RECEIVED
WILLESLEY MA 02482
JUN -9 A 8:51

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 contributor has given an aggregate amount of \$200 or more in a calendar year, 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
Line 18: OUTSTANDING LIABILITIES (ALL)				

Enter on page 1, line 7

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