



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

Fill in Reporting Period dates:

Beginning Date:

4-7-15

Ending Date:

5-12-15

Type of Report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☒ 30 day after election

☐ year-end report

☐ dissolution

CHRISTOPHER J. BARRETT

Candidate Full Name (if applicable)

SELECTMAN Town of Lynnfield

Office Sought and District

38 FAIRVIEW AVE. LYNNFIELD, MA 01940

Residential Address

Telephone Number (optional):

Committee To Elect Christopher J. Barrett

Committee Name

WALTER A. KENNY

Name of Committee Treasurer

25 HERITAGE LANE LYNNFIELD, MA 01940

Committee Mailing Address

Telephone Number (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

\$ 1,749.40

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

\$ 3,623.52

Line 3: Subtotal (line 1 plus line 2)

\$ 5,372.92

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

\$ 3,921.12

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

\$ 1,451.80

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

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

Line 8: Name of bank(s) used:

WAKEFIELD CO-OPERATIVE BANK

### 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:

Walter A. Kenny

(Treasurer's signature)

Date:

5-11-15

### FOR CANDIDATE FILINGS ONLY: 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:

Christal P. Ganey

(Candidate's signature)

Date:

5/11/2015



**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)
4/5/15	CHRIS BARRETT 38 FAIRVIEW AVE LYNNFIELD, MA 01940	\$1,773.52	Asst. Principal / City of Everett 121 VINE STREET EVERETT, MA 02149
4/7/15	GAIL + William Fines 6 BARNSELY RD LYNNFIELD, MA 01940	\$100	
4/13/15	GERARD + Lisa Fitzgeralds 43 DORRIDGE CIR. TOWSACRY, MA 01826	\$50	
4/14/15	HIC + Jocelyn Fleming 12 Fernway LYNNFIELD, MA 01940	\$50	
4/13/15	MATTHEW G. GAETA, Sr 14 NEWBURY ST PEABODY, MA 01960	\$100	
4/13/15	MATTHEW GOARRACINO 14 BROADMOOR LN PEABODY, MA 01960	\$100	
4/13/15	PAUL + MATTHEW GOARRACINO 527 SALEM ST. UNIT 17 LYNNFIELD, MA 01940	\$200	ELECTRICIAN / Self Employed 527 SALEM ST UNIT 17 LYNNFIELD, MA 01940
4/10/15	BERT JAMES 18 MIDLAND RD. LYNNFIELD, MA 01940	\$100	
4/7/15	John H. Kimball, Jr 618 MAIN STREET LYNNFIELD, MA 01940	\$100	
4/13/15	GERARD HOUNI 73 FAIRVIEW AVE LYNNFIELD, MA 01940	\$100	
4/13/15	PAULA A. PARZIALE 80 LOCKLEY RD LYNNFIELD, MA 01940	\$150	
4/13/15	MARY Philbin 8 McHAWK LN LYNNFIELD, MA 01940	\$500	RETIRED / NO Employer

Line 9: Total Receipts over \$50 (or listed above) \$3,323.52

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

Line 11: TOTAL RECEIPTS IN THE PERIOD

← 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.



Line 9: Total Receipts over \$50 (or listed above)	\$ 300	+ \$3,323.52 (from page 2)
Line 10: Total Receipts \$50 and under* (not listed above)		
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>	\$ 3,623.52	← Enter on page 1, line 2

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**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.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, 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
4/8/15	Connelly Printing	17 B Gill Street Woburn, MA 01801	Signs	\$ 1,773.52
4/24/15	Political MARKETING INTERNATIONAL, INC	P.O. Box 698 MARIANNA, FL 32442	AUTO. PHONE CALLS	\$ 150
4/24/15	WAREFIELD Item Co.	26 Albion Street WAREFIELD, MA 01880	Election CARD Mailing	\$ 1,850.80
5/6/15	WAREFIELD Item Co.	26 Albion Street WAREFIELD, MA 01880	Ad - Thank you	\$ 140.40
Line 12: Total Expenditures over \$50 (or listed above)			\$ 3,914.22	
Line 13: Total Expenditures \$50 and under* (not listed above)			\$ 6.40	
Enter on page 1, line 4 → <b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>			\$ 3,921.12	

\* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.