



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:

Reporting Period Beginning Month 2 Date 2 Year 10 Ending Month 3 Date 18 Year 10

Type of report: (Check one)

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

Mary Lou Buell

Full Name of Candidate (if applicable)

School Committee

Office Sought and District

721 Mayflower Street

Residential Address

617-447-5298

Tel. No. (optional)

Committee to Elect Mary Lou Buell

Committee Name

Kellie Bresnahan

Name of Committee Treasurer

35 Pine Lake Rd

Committee Mailing Address

781 934 6526

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 0

Line 2: Total receipts this period (page 2, line 11) \$ 1279.98

Line 3: Subtotal (line 1 plus line 2) \$ 1279.98

Line 4: Total expenditures this period (page 3, line 14) \$ 704.31

Line 5: Ending balance (line 3 minus line 4) \$ 575.67

Line 6: Total in-kind contributions this period (page 4) \$ _____

Line 7: Total (all) outstanding liabilities (page 4) \$ _____

Line 8: Name of bank(s) used Eastern Bank - Duxbury branch

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:

Kellie Bresnahan
Treasurer's signature (in ink)

3/18/10
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:

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)
3/16	Kellic Bresnahan 35 Pine Lake Rd Duxbury	100	00	
3/10	David Buell 8 Selmon St. Marblehead ^{MA} 0145	100	00	
3/28	Pamela Buell 22 Orne St. Marblehead ^{MA} 01945	50	00	
2/2	Mary Lynn Carson 21 Washington St Duxbury	100	00	
2/12	Lee Hutchinson 10 White Pine Lane Duxbury	50	00	
2/12	Jen Klein 380 Temple St. Duxbury	50	00	
2/2	Julianne Larsen 85 Franklin St. Duxbury	100	00	
2/3	Theodore + Julianne Lillys 74 Pinewood Ln Duxbury	50	00	
2/12	Philip Van Neste 65 Sandpiper Circle Falmouth ^{MA} 02536	200	00	retired
3/10	Jim O'Sullivan 30 Amadownay Duxbury	100	00	
3/2	Paul Saia + Rhoda Au 199 South St. Duxbury	100	00	
3/2	Kathleen Sweeney 22 Perry Dr. Duxbury	65	00	
Line 9: Total receipts in excess of \$50 (or listed above)		1065	00	
Line 10: Total receipts \$50 and under* (not listed above)		214	98	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1279	98	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	
2/20	Duxbury Chipper	Station St Duxbury	Ad	225	00
3/7	Duxbury Chipper	Station St Duxbury	Ad	168	00
3/5	Powder Horn Press	301 Court St Plymouth 02360	Printing	311	31
Line 12: Expenditures over \$50				704	31
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				704	31

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
			TOWN CLERK 10 MAR 10 AM 10:03 DUXBURY, MASS.	
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
Line 18: OUTSTANDING LIABILITIES (ALL)				

Enter on page 1, line 7