



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal ~~FITCHBURG~~ CITY CLERK

Office of Campaign and Political Finance

2017 OCT 30 PM 4:12

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Jan 1, 2017 Ending Date: SEP 9, 2017 OCT 30, 2017

Type of Report: (Check one)

- 6th day preceding preliminary
- 8th day preceding election
- 30 day after election
- year-end report
- dissolution

SAMANTHA SQUALIA
 Candidate Full Name (if applicable)
CITY COUNCIL AT LARGE
 Office Sought and District
225 SCOTT RD FITCHBURG MA
 Residential Address
 E-mail: electSAM.SQUALIA@gmail.com
 Phone # (optional): 978 391 3103

Committee to elect Sam Squalia
 Committee Name
Michael Della Manica
 Name of Committee Treasurer
29 BICENTENNIAL AVE LEAMINGTON
 Committee Mailing Address
 E-mail: mdellamanica1972@gmail.com
 Phone # (optional): 978 413 3672

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>6708.38</u>
Line 3: Subtotal (line 1 plus line 2)	<u>6708.38</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>4825.43</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>1882.95</u>
Line 6: Total in-kind contributions this period (page 6)	<u>475</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>SANTANDER</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)

Date: 10-30-17

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:

[Signature] (Candidate's signature)

Date: 10-30-17

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)
5/3/17	Rebecca Amaral 338 MADISON ST	20	
10/5/17	"	50	
10/14/17	STEPHEN BOLIO 13 PROVIDENCE ST.	100	
9/7/17	LINDA BYRNE 546 BLOSSOM ST 01920	100	
5/3/17	ROSA DE SOUSA 26 WEST ST. # 1 01920	30	
8/11/17	"	50	
	"	100	
5/3/17	CANDACE DOYLE 391 KIM ST. APT 3 R 01920	100	
5/3/17	SUSAN JEFFREY 325 RICHARDSON RD 01920	20	
9/3/17	"	20	
6/20/17	"	50	
5/3/17	PATRICK JATHUSAN 20 CUMBERLAND ST, RT 01920	35	
Line 9: Total Receipts over \$50 (or listed above)			
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.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
6/30/17	JEAN KADDY 57 HIGHVIEW ST 01420	75	
5/3/17	AMANDA KOECK 214 SANBORNS ST	20	
9/7/17 9/7/17	"	20	
8/9/17	"	25	
9/23/17	ACHLA MADAN 34 WILLIAMS RD 01420	100	
5/11/17	JEANNETTE McDERMOTT Blawson	100	
9/7/17	CHARLES MILHANS 54 RAY AVE 01453	20	
5/3/17	"	100	
5/3/17	Peter REYNOLDS 680 VINE ST ASTHLE	50	ENGINEER, MCKENZIE ENG. CO.
7/13/17	"	200	"
5/3/17	SANDRA REYNOLDS 50 DAY ST 01420	10	RETIRED
7/4/17	"	20	"
9/7/17	"	10	"

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

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.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
7/17/17	SANDRA REYNOLDS 50 DAW ST 01420	100	retired
9/1/17	"	100	"
10/20/17	"	100	"
4/18/17	SAMANTHA SQUALLA 225 Scott RD 01420	1483.38	ENGINEER PROJECT MGR, MCKENZIE ENG.
6/11/17	CHRISTINE SARACINO 57 H6 H ROK RD 01420	100	Retired
9/29/17	"	250	"
7/21/17	STEVEN SVOLIS 75 SOUTH ST 01420	100	
5/3/17	AMY WALSH 37 JEFFREY KEATING RD	25	
10/19/17	"	50	
6/22/17	BRENDA COLONO-WARDEN 56 MIDDLE ST LNE	100	

Line 9: Total Receipts over \$50 (or listed above) 3833.38

Line 10: Total Receipts \$50 and under* (not listed above) 2875

Line 11: TOTAL RECEIPTS IN THE PERIOD 6708.38 ← 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.

(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
5/4/17	Beener's Pub 310 MAIN ST FITCHBURG	310 MAIN ST FITCHBURG	Campaign Kickoff	200
6/15/17	City of Fitchburg	166 Boulder Dr.	CIVIC DAYS PARADE REG.	75
4/19/17	Fancy Antiques Cookies	Fancy Antiques Cookies, Inc	MARKETING FOR KICKOFF	85.53
9/11/17	Highway Traffic Supply	Highway Traffic Supply NET	YARD SIGNS	145.83
10/19/17	Minute Man Press	386 Summer St FITCHBURG	POSTCARDS	239.06
6/21/17	Signs on the Cheap	Signs on the Cheap, Inc	SIGNS	242.52
7/10/17				649.00
9/11/17				517.84
10/2/17				195.27
4/26/17				129.33
4/18/17	STAPLES	289 N. MAIN ST LEAMINGTON	envelopes/cards prints	67.03
5/11/17				59.22
Line 12: Total Expenditures over \$50 (or listed above)				—
Line 13: Total Expenditures \$50 and under* (not listed above)				—
Line 14: TOTAL EXPENDITURES IN THE PERIOD				—

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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/20/17	Stripe	STRIPE.COM	VENDOR FEE CREDIT CARD	57.95
7/5/17	USPS	881 MAIN ST STE 3 FITCHBURG	Postage	136
5/2/17				95.20
6/2/17				314.96
10/16/17	USPS	68 MAIN ST LEMINSTER	Postage	94.08
5/8/17	USPS	USPS.COM	Postage	98
5/9/17				99.75
6/28/17	VistaPrint	VISTAPRINT.COM	Marketing Materials	158.02
7/25/17				183.99
7/27/17				89.22
4/26/17				95.19
5/1/17				341.06
5/8/17				80.17
Line 12: Expenditures over \$50 (or listed above)				4509.22
Line 13: Expenditures \$50 and under* (not listed above)				316.21
Line 14: TOTAL EXPENDITURES IN THE PERIOD				4825.43

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 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
8/16/17	MARK D GIRUARD	57 OLD OAK AVE WESTMINSTER MA	Campaign Photography	200
9/8/17	Pete COTE	202 CLARENCE ST FITCHBURG MA	Pasta Dinner Fundraiser	275
Line 15: In-Kind Contributions over \$50 (or listed above)				475 →
Line 16: In-Kind Contributions \$50 & under (not listed above)				0
Line 17: TOTAL IN-KIND CONTRIBUTIONS				475 -

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. Page 6

