



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

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Office of Campaign and Political Finance  
TOWN CLERK

2016 JAN 20 PM 3:22

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: \_\_\_\_\_ Ending Date: 12/31/2015  
 TOWN OF WILMINGTON, MA

Type of Report: (Check one)  
 8th day preceding preliminary     8th day preceding election     30 day after election     <sup>2015</sup> year-end report     dissolution

Judith L. O'Connell  
 Candidate Full Name (if applicable)  
Board of Selectmen  
 Office Sought and District  
2 Lockwood Road Wilmington, MA  
 Residential Address  
 Telephone Number (optional): 01857

The Committee to Elect Judy O'Connell  
 Committee Name  
Shelley A. Sarato  
 Name of Committee Treasurer  
36 Crescent Street Wilmington, MA  
 Committee Mailing Address  
 Telephone Number (optional): 978-804-1398 <sup>01857</sup>

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>1811.45</u>
Line 2: Total receipts this period (page 2, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>(1811.45)</u>
Line 4: Total expenditures this period (page 3, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>(1811.45)</u>
Line 6: Total in-kind contributions this period (page 4)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	<u>0</u>
Line 8: Name of bank(s) used:	<u>No Current Bank Account - previous bank closed</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: 1/20/2016

#### 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.

##### 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 1/20/2016