



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:

JAN 1, 2023

Ending Date:

OCT 30, 2023

Type of Report: (Check one)

☐ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

MICHAEL JAMES SERINO

Candidate Full Name (if applicable)

SELECTMEN • SAUGUS

Office Sought and District

54 GATES RD SAUGUS

Residential Address

E-mail: MICHAEL.SERINO@YAHOO.COM

Phone # (optional): 781-231-0987

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

55.53

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

700.00

Line 3: Subtotal (line 1 plus line 2)

755.53

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

554.86

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

200.67

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

242.29

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

1,000.00

Line 8: Name of bank(s) used:

EASTERN 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:

(Treasurer's signature)

Date:

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:

Michael J. Serino

(Candidate's signature)

Date:

10-30-23

RECEIVED
2023 NOV - 1 A 8:52
TOWN CLERK'S OFFICE
TOWN OF SAUGUS, MASS.

SCHEDULE A: RECEIPTS (continued)[illegible]

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

700.00

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

Line 11: TOTAL RECEIPTS IN THE PERIOD

700.00

← 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.

(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.)

[illegible]

* 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
9.14.23	CONNOLLY PRINTING	173 GILL ST WOBURN, MA	LAWN SIGNS	290.86
10.23.23	USPS	437 LINCOLN AVE SAUGUS MA	STAMPS	264.00
Line 12: Expenditures over \$50 (or listed above)				554.86
Line 13: Expenditures \$50 and under* (not listed above)				0
Line 14: TOTAL EXPENDITURES IN THE PERIOD				554.86

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 6 on page 1.

[illegible]

* 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 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 6 on page 1.

[illegible]

* 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
8-25-21	MICHAEL J. SERINO	54 GATES RD SAUGUS, MA	LOAN	1,000.00
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				1,000.00

2023 NOV - 1 A 8:53
 TOWN CLERK'S OFFICE
 TOWN OF SAUGUS, MASS.

RECEIVED



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

File with: City or Town Clerk or Election Commission

Fill in Reporting Period: 2023 OCT 30 Beginning Date: 11/20/22 Ending Date: 10/30/23

Type of Report: (Check one)

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

Anthony William Gervasio Sr.
Candidate Full Name (if applicable)
Boston 4th District
Office Sought and District
27 Seaside Way, South Norwalk, CT 06854
Residential Address
Telephone Number (optional): 857-246-1348

Common to Elect
Committee Name
John Gervasio
Name of Committee Treasurer
27 Seaside Way, South Norwalk, CT 06854
Committee Mailing Address
Telephone Number (optional): 781-856-1720

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>174.00</u>
Line 2: Total receipts this period (page 3, line 11)	<u>2,600.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>2,774.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>2,444.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>330.00</u>
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:	<u>Eastern Bank</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:

John Gervasio

(Treasurer's signature)

Date: 10/30/23

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: 10/30/23

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)
8/15/23	THOMAS ROSS 500 OCEAN AVE Unit 602 REVERE MA 02151	500 ⁰⁰	Business Owner/contractor Self Employed
10/1/23	SCOTT COLEMAN 4 MILLAR AVE SAGIT MA	500 ⁰⁰	Business Owner Self Employed
10/1/23	JOHN COLEMAN 310 LINCOLN AVE SAGIT MA	1,000	Retired, Aunt
10/10/23	PATRICK CARLINO 31 ARROWHEAD RD SAGIT MA	300	Business owner/ Self Employer
10/10/23	THE RICHARD LARRY CARLINO 22 HUNTERY RD. SAGIT MA	300	Family Donor in Memory of Richard Larry

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

2,600⁰⁰

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

Line 11: TOTAL RECEIPTS IN THE PERIOD

2,600⁰⁰

← 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)
			RECEIVED
			2023 OCT 30 A 11: 22
			TOWN CLERK'S OFFICE TOWN OF SAUGUS, MASS.
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.

100

(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.)

* 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)[illegible]

Line 12: Expenditures over \$50 (or listed above)

Line 13: Expenditures \$50 and under* (not listed above)

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD

* 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
			Line 15: In-Kind Contributions over \$50 (or listed above)	
			Line 16: In-Kind Contributions \$50 & under (not listed above)	
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	

* 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.

[illegible]



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:

1/1/2023

Ending Date:

10/30/2023

Type of Report: (Check one)

☐ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

JEFFREY Cicolini

Candidate Full Name (if applicable)

SELECTMAN

Office Sought and District

6 Hitching Hill Rd SAUGUS MA 01906

Residential Address

E-mail: JVCPTSFAW@hotmail.com

Phone # (optional): (781) 233-1978

Committee to Elect JEFFREY Cicolini

Committee Name

Julie A. Cicolini

Name of Committee Treasurer

6 Hitching Hill Rd SAUGUS MA 01906

Committee Mailing Address

E-mail: Jules101097@hotmail.com

Phone # (optional): 781 233 1978

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

\$1023.27

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

-

Line 3: Subtotal (line 1 plus line 2)

1023.27

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

740.50

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

\$282.77

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

-

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

\$1025.82

Line 8: Name of bank(s) used:

EASTERN 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:

(Treasurer's signature)

Date:

10/30/23

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:

(Candidate's signature)

Date:

10/30/23

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.)

[illegible]

* 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)[illegible]

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 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.)

[illegible]

Line 12: Total Expenditures over \$50 (or listed above)

740.50

Line 13: Total Expenditures \$50 and under* (not listed above)

Line 14: TOTAL EXPENDITURES IN THE PERIOD

740.50

* 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)

[illegible]

* 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 6 on page 1.

[illegible]

* 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.

[illegible]

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

102582



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: Ending Date: Oct 30, 23

Type of Report: (Check one)

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

Sebastian Dimodica
Candidate Full Name (if applicable)

Selectman
Office Sought and District

11 Bristol St Scituate
Residential Address

Telephone Number (optional): 781-953-2377

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

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

0

Line 3: Subtotal (line 1 plus line 2)

0

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

2210

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

2210

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

0

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

0

Line 8: Name of bank(s) used:

Eastern Bank

2023 OCT 30 P 4:01
TOWN CLERK'S OFFICE
TOWN OF SCITUATE, MASS.

RECEIVED

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:

(Treasurer's signature)

Date:

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

Candidate with Committee and no activity independent of the committee

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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's signature)

Date:

Oct 30, 2023

SCHEDULE A: RECEIPTS (continued)[illegible]

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 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.)

[illegible]

* 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
8-22-23	Sechen Signs		Signs	382.50
8-22-23	Sechen Signs		Signs	388.00
10-24-23	Sechen		Signs	530.00
Line 12: Expenditures over \$50 (or listed above)				2210.50
Line 13: Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				2210.50

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 6 on page 1.

[illegible]

* 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.

[illegible]

Company Name

Sebastian D

To:



SACHEM

INVOICE

Description of Work

SIGN
works

QTY **3**

Size Lgth _____ Hgt _____

Font _____

Color _____

781-941-8007

124 Main ST. SAUGUS, MA 01906

FAX :781-941-8009

Date

10.24.2023

Po#

ALL CREDIT CARD PURCHASES
ARE SUBJECT TO A
4% PROCESSING FEE

Material _____

50% deposit on all orders balance due upon completion of delivery.

All Price Quotes Good For 30 Days

Description

4 X 6 SIGNS

PAID IN FULL

Bucket _____

Labor **\$** _____

In Shop Labor _____

Artwork _____

Materials **\$** _____

Install **\$** _____

Tax _____

Total **\$530.00**

Deposit _____

Balance _____

Signature _____

Company Name **Sebastian D**

To: _____



SACHEM **INVOICE** Description of Work

SIGN
works

781-941-8007

124 Main ST. SAUGUS, MA 01906

FAX : 781-941-8009

Date	Po#	ALL CREDIT CARD PURCHASES ARE SUBJECT TO A 4% PROCESSING FEE
8.22.2023		

50% deposit on all orders balance due upon completion of delivery.

All Price Quotes Good For 30 Days **Description**

GTY 30 : LAWN SIGNS DOUBLE SIDED **\$300.00**
GTY 1 : 2 X 3 SINGLE SIDED **\$65.00**

PAID IN FULL

QTY **31**

Size Lgth _____ Hgt _____

Font _____

Color _____

Material _____

Bucket _____

Labor **\$** _____

In Shop Labor _____

Artwork _____

Materials **\$365.00**

Install **\$** _____

Tax **\$23.00**

Total **\$388.00**

Deposit _____ Balance _____ Signature _____

Company Name **Sebastian D**

To: _____



SACHEM **INVOICE** Description of Work

SIGN
works

781-941-8007

124 Main ST. SAUGUS, MA 01906

FAX :781-941-8009

QTY **2**

Size Lgth **6** Hgt **4**

Font _____

Color **DIGI PRINT**

Date

8.22.2023

Po#

ALL CREDIT CARD PURCHASES
ARE SUBJECT TO A
4% PROCESSING FEE

Material

CORO

50% deposit on all orders balance due upon completion of delivery.

All Price Quotes Good For 30 Days

Description

PAID IN FULL

Bucket

Labor \$

In Shop Labor

Artwork

Materials

Install \$

Tax

Total

\$360.00

\$22.50

\$382.50

Sebastian
DiModica
SELECTMAN

Deposit

Balance

Signature

