

# Form CPF M 102: Campaign Finance Report Office of Campaign and Political Finance RECEIVED **Municipal Form**

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date 16 Jan 1	., 2019 Ending Date: Dec 31, 2019
Type of Report: (Check one) TOWN CLERK'S OFFICE	
TANIM OF SALIGHS MASS.	
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Scott A. Brazis	Committee to Elect Scott Brazis
Candidate Full Name (if applicable)	Committee Name
Selectman - District 5	Bill Williamson
Office Sought and District	Name of Committee Treasurer
6 Cave Rock Road, Saugus, MA 01906  Residential Address	2 Cave Rock Road
	Committee Mailing Address  E-mail: bill.lindawilliamson@gmail.com
E-mail: sbrazis@aol.com	
Phone # (optional):	Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
Virginia Police Poles of from apprison and the	1 220 64
Line 1: Ending Balance from previous report	1,228.64
Line 2: Total receipts this period (page 3, line 11	)
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, lin	ne 14) 1,228.64
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (p	page 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: North Shore Bank	
Affidavit of Committee Treasurer:	
I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee it.  Signed under the penalties of perjury:	d contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c. 55.
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 t	box only)
Candidate with Committee	
I certify that I have examined this report including attached schedules and it is, to the	he best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ng period that are not otherwise disclosed in this report.
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the second contributions.	nts, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature)  Date: Nov 12, 2019

#### 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.)

Occupation & Employer

[1] Mor contributions of \$200 or more) Name and Residential Address **Date Received** (alphabetical listing required) Amount 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

<sup>\*</sup> 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
		HEUE	V L. V
		2019 NOV 12	P 2: 46
		TOWN CLERK TOWN OF SAU	
Line 9: Total Rece	cipts over \$50 (or listed above)		
Line 10: Total Rec	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<sup>\*</sup> 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.

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 NOV   2	Purpose of Expenditure	Amount	
Nov 11, 2019	Scott A. Brazis	6 Cave Rock Road TOWN CLER Saugus, MA 01906 TOWN OF SAU	Reimbursement for Loan to	1,218	
Nov 11, 2019	My Brother's Table	98 Willow Street Lynn, MA 01901	Donation	10.64	
	-11-	Line 12: Total Expenditures or	ver \$50 (or listed above)	1,228.64	
		Line 13: Total Expenditures \$5	50 and under* (not listed above)		
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	1,228.64	
* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized					

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

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# **SCHEDULE B: EXPENDITURES (continued)**

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
			RECEIVED	
			Frank it is as	
			2019 NOV 12 P 2: 46	
			TOWN OF FOULD OFFICE	
			TOWN CLERK'S OFFICE TOWN OF SAUGUS, MASS.	
L				
		Line 12: Expenditures over \$3	50 (or listed above)	
	Line 13: Expenditures \$50 and under* (not listed above)			
		Line 13. Expenditures \$30 and	a 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				

<sup>\*</sup> 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
				D.
			TOWN OF S	OF THE PERSON NAMED IN COLUMN TO PERSON NAME
			Smene, Wass.	B
			\$5. CE	
		Line 15: In-Kind Contributions	s 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				

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<sup>\*</sup> 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
			To	召
			OWN OF S	EN
			IGUS, MASS	ملا بو
		,	<b>3</b> , (3)	
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				