

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	2021 JAP 28 City of Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	Ending Date: 12-31-20
Type of Report: (Check one)	\ /
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Candidate Full Name (if applicable) School Committee School Committee Office Sought and District WENTURA Residential Address E-mail: CBiancheria DCharter. NET Phone # (optional): 508-868-4212	CTEDIANNA L Biancheria Committee Name Stephanie Watson Name of Committee Treasurer 8 VENTURA ROLLURCMA 01604 Committee Mailing Address E-mail: DBIANCHERIA DCHARTER. NET Phone # (optional): 508 8684212
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	1148.34
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	1148.34
Line 4: Total expenditures this period (page 5, lin	ne 14)
Line 5: Ending Balance (line 3 minus line 4)	1148.34
Line 6: Total in-kind contributions this period (pa	age 6)
Line 7: Total (all) outstanding liabilities (page 7)	-6-
Line 8: Name of bank(s) used: BEEKS	hire Bank
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the bes activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority of on behalf of this committee in Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. All Mark (Treasurer's signature) Date: 1-20-21
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in acting under the authority or on behalf during this reporting the incurred any liabilities nor made any expenditures on my behalf during this reporting	e best of my knowledge and belief, a true and complete statement of all campaign finance coordance with the requirements of M.G.L. c. 55. I have not received any contributions, g 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 alting under the authority or on behalf of the Signed under the penalties of perjury:	s, in kind contributions and liabilities for this reporting period and represents the

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)
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9			
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ine 9: Total Rece	ipts over \$50 (or listed above)		
ine 10: Total Rece	eipts \$50 and under* (not listed above)		
ine 11: TOTAL I	RECEIPTS IN THE PERIOD		Enter on mage 1 line 2
		/	Enter on page 1, line 2 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)
1			
		1	
ine 9: Total Receip	ots over \$50 (or listed above)		
ine 10: Total Recei	pts \$50 and under* (not listed above)		
ine 11: TOTAL R	ECEIPTS 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.)

eport all expenditures. Please include your committee name and a page number on each page.) To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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		Line 12, Texal Face 22	on 050 (on 1) st - 1 - 1 \	-
		Line 12: Total Expenditures ov	er \$50 (or listed above)	<u></u>
Line 13: Total Expenditures \$50 and under* (not listed above)				
				/
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES 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.

Page 4

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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	1			
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				V
10				
				7
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and t	under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT		

^{*} 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
				i
				<u> </u>
		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.

Page 6

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
		3		
	Enter an anal 1 1 2 2	Line 18: TOTAL OUTSTANI	INC HADII ITIES (ATT)	

Page 7



Form CPF M 102: Campaign Finance Report Municipal Form Weresster City Clerk Office of Campaign and Political Finance JAN 21 PM 4: 43

Fill in Reporting Period dates: Beginning Date:	28/9 Ending Date: 2/3/20/9
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Candidate Full Name (if applicable) School Committee Office Sought and District Residential Address E-mail GBIANCHERIA & CHARTER NET Phone # (optional): 5088684212	C.T.E. Dianna L-Biancheria Committee, Name Stephenie R Watson Name of Committee Treasurer 8 Kentura Rd WORC 01604 Committee Mailing Address E-mail Blancheria & Charter. NET Phone # (optional): 508 8684212
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	1156.69
Line 2: Total receipts this period (page 3, line 11)	1550.00
Line 3: Subtotal (line 1 plus line 2)	270(a, 69
Line 4: Total expenditures this period (page 5, line	e 14) 1558.35
Line 5: Ending Balance (line 3 minus line 4)	11148,34
Line 6: Total in-kind contributions this period (pa	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: Commerce	e/BeekshierBank
activity, of all persons acting under the authority or on behalf of this committee in activity.	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date:
incurred any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, refeipts, expenditures, dishersements campaign finance activity of all persons acting under the authority or on schalf of this Signed under the penalties of perjury:	best of my knowledge and belief, a true and complete statement of all campaign in-kind contributions and liabilities for this reporting period and represents the

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)
10/3/	CINDA CUERAN 34 SheeBecok Ave	50	
16/31	FRANCIS-FORD 8WalbeidgeRd PAXTON	50	
18/4	JEANNE RAFFERTY 9FOX WOOD LANE NORTH BORD	250	ADMINISTRATION RAFFERTYLAWFIRM
1%1	EMELIA TOMAIOLO 48 INDEPENDENCE LANE STREW SAVRY	50	
10/31	Cheeyl Tomczyk, 6PINE VIEW Rd STEPLING	<i>/∞.</i>	
10/31	LOCAL 495 NAGE 29 ENDICOHST WORC	100.	UNON
"/,	LOCAL 272 Labors INNYL OFNORTH AMERICA Laborsway-Hopkinton 01748	500	WIDD
		13	
Line 9: Total Rece	ipts over \$50 (or listed above)	1100	
Line 10: Total Rece	eipts \$50 and under* (not listed above)	450	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	1550	Enter on page 1, line 2

SCHEDULE A: RECEIPTS (continued)

	SCHEDULE A: R	ECEIT 13 (coi	aunaea)
Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
			W = 2
Line 9: Total Rece	ripts over \$50 (or listed above)		
Line 10: Total Rec	eipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
* If you have itemize	d receipts of \$50 and under include them in line	e 9 Line 10 shoul	d include only those receints not itemized above

^{*} 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 (alphabetical listing) Address Purpose of Expenditure Amount 1		To Whom Paid	nittee name and a page number on	l cacii page.	
WORC WORC WORC WORC WORC WEST BORD WOOD 119.94 WEST BORD WOOD 39.46 WOOD 39.46 WOOD 39.46 WORC WORC WORC WOOD 39.46 WORC WORC	Date Paid	(alphabetical listing)	1	Purpose of Expenditure	Amount
	12/26			INAUGURAL	250
10/31 Oak HILL CDC 74 PROVIDENCE ST DONATION 1.00.— 10/31 QUICKSTOP 340 Sheewsburgst Carbs 35.— 11/4 POST LEGION WORC 326 Plantation ST DONATION 75.— 11/4 Stop and Shop SUSLINCOINST CHEE 36.95 11/1 Telegram & 100 Trontst Prival Beachasting 402.— 11/1 Michael Perro 8Ventura Rd Worc Privalon Tx 06010 500.60 Line 12: Total Expenditures over \$50 (or listed above) 155835 Line 13: Total Expenditures \$50 and under* (not listed above)	11/24	CURRY COPY	190 TURNPIKE Rd WESTBORD	TICKETS	119.94
10/31 QVICKSTOP 340 Shrewsburyst Carls 35 11/4 POST LEGION 326 Plantation St DONATION .75 11/4 Stop and shop S46 Lincolnist CARLS .36.85 11/1 Telegram of 100 Trantst Plantation St WORC .402- 11/1 Michael Perro 8Ventura Rd WORC .4010 .500.60 Line 12: Total Expenditures over \$50 (or listed above) 1558.35	11/4	LOEWS		WOOD	39,46
11/4 FOST LEGION 326 Plantation ST DONATION 75 11/4 Stop and shop SYGLINCOLNST CAKE 36.95 11/1 TELEGRAM & 100 TRONTST PAVERTISING 402 11/1 MICHAE FERRO SVENTURA RD VOICE BROADLASTING 500.60 11/1 MICHAE FERRO SVENTURA RD VOICE BROADLASTING 500.60 Line 12: Total Expenditures over \$50 (or listed above) 155835 Line 13: Total Expenditures \$50 and under* (not listed above) 1	10/31	Oak HILL CDC		Donation	100.
I'/4 Stop and shop S45Lincolnst CARE 36.95 I'/1 Telegram & 100 Frontst Pavertising 402.— I'/1 Michael Perro SVentura Rd Work Broadcasting Frelington Tx 06010 500.60 Line 12: Total Expenditures over \$50 (or listed above) Line 13: Total Expenditures \$50 and under* (not listed above)		Quickstop	111 —	CORDS	35
IIII TELEGRAM & 100 FRONTST PAURETISING 402.— IIII MICHAEL PERRO SVENTURA RD VOICE BECACLASTING PRELINGTON TX 06010 500. 60 Line 12: Total Expenditures over \$50 (or listed above) Line 13: Total Expenditures \$50 and under* (not listed above)	11/4			DONATION	75
Michael Perro SVentura Rd Woke Becardasting 500.60 Line 12: Total Expenditures over \$50 (or listed above) Line 13: Total Expenditures \$50 and under* (not listed above)	1//4	Stop and shop	545LINCOLNIST WORC	CAKE	36.95
Line 12: Total Expenditures over \$50 (or listed above) Line 13: Total Expenditures \$50 and under* (not listed above)	["//	TELEGRAM & GAZette	100 FRONTST WORC	Advertising	402
Line 13: Total Expenditures \$50 and under* (not listed above)	11/1	Michael Perro	8Ventura Rd WORC	Voice Beachasting Alelington TX 06010	500.60
Line 13: Total Expenditures \$50 and under* (not listed above)					
Line 13: Total Expenditures \$50 and under* (not listed above)					
Line 13: Total Expenditures \$50 and under* (not listed above)					
			Line 12: Total Expenditures ov	er \$50 (or listed above)	155835
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD 1558.35			Line 13: Total Expenditures \$50	0 and under* (not listed above)	-0-
		Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	1558,35

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4

SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
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		Line 12: Expenditures over \$50) (or listed above)		
		2.1.0 12. Expenditures over \$50	(or iisted above)		
		Line 13: Expenditures \$50 and	under* (not listed above)		
		2 15. Experience \$50 and	and the tisted above)		
	Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				
		include them in line 12. Line 13 s			

^{*} 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	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 C	ONTRIBUTIONS	

^{*} 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.

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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
[1//,	MICHAEL PEREO	8 VENTURARD WORC	VOICE BROADCASTING ARINGTON TX6010	500,00
	Enter on page 1, line 7 -	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	500. [∞]



Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance 2019 0 7 28 8 2: 32

Fill in Reporting Period dates: Beginning Date:	5-23-2019 Ending Date: OCT 28-2019
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Candidate Full Name (if applicable) School Committee Office Sought and District 8 VENTURA ROAD Residential Address E-mail dBancheria P Charter. NET Phone # (optional) 508 8684212	CTE Danna L Branche Ere Stephanie Raffa Watson Name of Committee Treasurer 8 Ventura Rd WAC 01664 Committee Mailing Address E-mail dBiancheria achaeter NET Phone # (optional) S08 868 42 12
SUMMARY BALAN	NCE INFORMATION:
Line 1: Ending Balance from previous report	3201,26
Line 2: Total receipts this period (page 3, line 1	11) 1915.00
Line 3: Subtotal (line 1 plus line 2)	5116.26
Line 4: Total expenditures this period (page 5,	line 14) 3959.57
Line 5: Ending Balance (line 3 minus line 4)	1156.69
Line 6: Total in-kind contributions this period	(page 6)
Line 7: Total (all) outstanding liabilities (page	
Line 8: Name of bank(s) used: Commerce	CE/BERKSHIRE BANK
activity, including all contributions, loans, receipts, expenditures, disbursements, in-ki finance activity of all persons acting under the authority or on befulf of thur committee. Signed under the penalties of perjury:	e in acceptance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 0-28-2019
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check	l box oaly)
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to activity, of all persons acting under the authority or on behalf of this committee is incurred any liabilities nor made any expenditures on my behalf during this report	to the best of my knowledge and belief, a true and complete statement of all campaign finance in accordance with the requirements of $M G L. c. 55$. I have not received any contributions, rling period that are not otherwise disclosed in this report.
Candidate without Committee 1 certify that I have examined this report including attached schedules and it is to finance activity, including contributions, loans, receipts, expenditures, disbursen campaign finance activity of all persons active under the authority or the behalf of	9. the best of my knowledge and belief, a true and complete statement of all campaign pents, in-kind contributions and liabilities for this reporting period and represents the of this candidate in proordance with the requirements of M.G.L. c. 55.
Signed under the penalties of periury	Date: 10-28-2019

Bianchee	la		Page 1 Receipts
SATE REC	Name		
	address	amount	OCCUPATION CONTINUES
16-17	Blanchenia John	300,	for Contributions of 200 or more Tushutar City of WORCESTER
	BEAURETARD, MEMEL PRCTORE ROAD WORC OIGOR	25	
	BERGMAN, WENDY, 11 KENSINGTON HOTS WORC 01602	100	
	BRINDISI, DEREK GORRISON ST	50	
	Campaniello Cheistine 80 Beightwoodeve	50	
_	CliffORD, RAYMOND 76CRANBROOK DR WORL OBZO	50	
_	CUTH'HA, NANCY 199 COBVEN AVE WORC 01604	50	
-	DIRENZO, JOHN JA 27 DAVIS Rd MORBURYOISZ7	100	
	FIORE, MARIASTEILA 118 ALBTON AVE WORL 01604	25	
liene -	KONTAXI, GEORGE 117 HORNE WAY MILLBURY MADIST	25	
,	LaCava, Paul 11Spring Valley Rd week 61609	40	
	LYONS, MICHAEL 7 HOBSON AVE BOYLSTON	50	
_	CTEC, MERO-CAPISON YL BENEDICT ROLLING	100	0.
-	CTE M. MOORE 20 BENGSTONIANE MILL	1 1/1	0,
	MORRISSEY, NICOLE	10	
	Oliveri, Anthony 13 MARJORIEST WORK	50	3,—

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	
9-25	FRIENDS OF Senior Center	128 PROVIDENCE ST WORC 01604	DOKATION	100,23	
10-8	LPI	East 71 st St Cuy AHOGA HEIGHTS	ADIN BUILTIN	353.2	
9-25	QUICK STOP PEINT 3405heusburys	340 Sheenseny word 01604	Stickers	132.82	
18-2	Quickstop Print	HOShROWSBURY WORC 01604	Caros	ત્ર33, ⁷ ડ	
9-25	WORC STATE UNIVERSITY	486 Chandler st ware 01602	DONATION	60.00	
10-10	WORC TELEGRAM 4 GOZHE	100 FRONT ST WORL 01668	Advertisement	1165.00	
10-21	WORL TElegram	100 FRONT ST WORL 01608	ADVERTISEMENT	615,60	
15-18	WTAGRADIO	96STEROLENE PAXTON MA	Advertisement	1300,00	
		Line 12: Total Expenditures or	ver \$50 (or listed above)	3959,57	
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	-	
***	Enter on page 1, line 4 →		FURES IN THE PERIOD	3959,57	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 4

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.

ate Received	From Whom Received*	Residential Address	Description of Contribution	Value
		-		

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		* q		
		12.00		
ا <u></u>				
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Para 1 No. 6 x	Line 17: TOTAL IN-KIND	TONED IN THE TONE	*

^{*} 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

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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
				Sec.
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	X



Form CPF M 102: Campaign Finance Report

Municipal Form vod
Office of Campaign and Political Finance

2019 SEP -3 PM 3: 05

Fill in Reporting Period dates: Beginning Date: 13/20/9 Ending Date: 68/23/20/9
Type of Report: (Check one) ■ 8th day preceding preceding preceding election 30 day after election year-end report dissolution
8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution
Dianna L. Biancheria School Committee School Committee Stephanie R Watson Name of Committee Treasurer
SVENTURA Rd 8 VENTURA Rd
Residential Address E-mail <u>D.Biancheeia D.Charter. NET</u> Phone # (optional)
SUMMARY BALANCE INFORMATION:
Line 1: Ending Balance from previous report 156.26
Line 2: Total receipts this period (page 3, line 11)
Line 3: Subtotal (line 1 plus line 2) 3201.26
Line 4: Total expenditures this period (page 5, line 14)
Line 5: Ending Balance (line 3 minus line 4) 3201.76
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: Commerce BERKShire
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 bebuilt of this committee in accordance with the requirements of M.G.L. c. 55. **Index the penalties of perjury:
NDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)
**mmittee *mined 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 **regular 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. **Je any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign as, loans, receipts, expenditures, dispursements, in-kind contributions and liabilities for this reporting period and represents the sons acting under the authority or on behalf of this randidate in accordance with the requirements of M G L c. 55. Date: 9-3



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)
4-30	GERALD AZZORONE 1045hREWSBURYST	100	
) f	DEEK BRINDISI GORRISONST WORL	50	
V	LEONAR L CIVETEROS 289 Harrington Way-Wor	50	
U	Ruproel Clifford 96 Ceanspook DeHolden	100	
4	JOE Fakone 82 Alvarabo AVE WORC	150	
11 Ethile	Richard Markanian 40EANST WORC	100	
4	CARRY CREAD-CARISON ETE 42-BENEOUT Rd LUDRE	100	
/,	MICHAEL MODE 20 BENGSTON LANE MILLBURY	100	
l _i	Belinda MORPONE 382 Hamilton St WORC	75	
4	Donna Murgo 220V/Uth St Wore	50	
4	James Murphy Jr 11 Bay Edge Dr Wore	50	
li	TIMOTHY MUZRAY II KINNICUTT Rd WORE	100	
Line 9: Total Receipts over \$50 (or listed above) /025			
Line 10: Total Receipts \$50 and under* (not listed above)			
	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)

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
4-30	Anthony Oliveel 13 Maejoaie St woec	50	
	Thomas Oliveri 17 Hiltop Lindle WORC	100	
	Colleen OBRIEN 162-PIRESIDE IN HOLLEN	50	
	Marguret Olivieri 5 DE Marco TERR WORE	50	
	PhilipPalMERI 28 BUCKINGham Rel WORL	75	
	Michael Repotto 319 PlantationSt worc	75	
	JENE PALERMO 1905. QUINSIGAMOND AVE Sheeuseusy	50	
	Anthony PETRONE 16 Kelsey DR. WORL	50	
	Alan Fettway- 34NVTMEG DE UORC	50	
	Anthony PEZZC lle 42 Gleen COURT St WORC	50	
	Paul PEZZElle 197 Commonweathlive Boston	150	
	Phil Raffa Oblate AR Shrew	50	
	ROBERT RAND 48ZENITH DE WORC	50	
Line 9: Total Rec	eipts over \$50 (or listed above)	850	
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.

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278.77
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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.)

	To Whom Paid	The state of the s	caon pages,	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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		Line 12: Total Expenditures ov	er \$50 (or listed above)	
		Line 13: Total Expenditures \$50	0 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				

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4

SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid			
Pate Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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				N .
		Line 12: Expenditures over \$50	0 (or listed above)	
		Line 13: Expenditures \$50 and	under* (not listed above)	
Enter on page 1 line 4 -> Line 14: TOTAL EXPENDITURES IN THE PEDIOD				
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				

^{*} 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 Contribution	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 C	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.

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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
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	7