

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
11/8/12	TIMOTHY DILLON 47 AIRLIE ST. WORC. 01606	200.00	UNEMPLOYED.
11/12/12	MICHAEL WADE 118 FLAGG RA. EAST BROOKFIELD 01515	100.00	
11/12/12	RICHARD CANCELMO 30 CLEMENT ST. WORCESTER, MA. 01603	100.00	
11/16/12	BONNIE JOHNSON SPINE ST. BOYLSTON, MA. 01505	100.00	
11/16/12	CLAYTON WILLIAMSON 17 TIDESWELL LANE WORC. 01609	100.00	
11/16/12	WILLIAM RANDALL 201 GRABROOK DR. HOLDEN 01520	100.00	
11/16/12	JOANNE LARSON 2 ROMOLA RD. WORC, 01605	100.00	
11/16/12	PAUL LARSON 2 ROMOLA RD. WORC, 01605	100.00	
11/16/12	MICHAEL GAFFNEY 1 BANCROFT TOWER RD. WORC. 01609	200.00	ATTORNEY
11/16/12	BRADD WYATT 38 GLAZIER ST. BOYLSTON, MA. 01505	200.00	SMALL BUSINESS OWNER
11/16/12	MARGARET COLORID 3 HOMEL ST WORCESTER, 01602	500.00	RETIRED.
11/14/12	JOHN COLORID 5 HALL ST. WORCESTER, 01602	500.00	SELF EMPLOYED SMALL BUSINESS OWNER
11/16/12	DOMENIC FRATTONIO 397 PROSPECT ST. SHREWS, 01545	100.00	
Line 9: Total Receipts over \$50 (or listed above)		2400.00	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		2400.00	← 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 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.

This page may be copied 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)
11/16	STEVEN TRIS BASTONE	25 00	
11/16	BOB BORELLA 10 MONTIGELLO DR. WORC 01603	25 00	
11/16	CHRISTOPHER PETULLA	30 00	
11/19	ILIR DANGA 1006 PLEASANT ST. WORC 01602	25 00	
11/14	JACK REIFF 403 BROWNING LANE WORC-01609	25 00	
11/14	CAROLINE FRANKE 11 CATHERINE ST. WORC 01605	50 00	
11/19	ILIR MELKA 10 HOMER ST. WORC 01602	25 00	
12/7	MARY CASEY 1 NIPMUCK RD. DARTON, MA 01612	25 00	
12/12	KIELYN KOURY 10 BANCROFT TOWER RD. WORC 01605	25 00	
12/15	JUDITH MILLOTT 6 BANCROFT TOWER RD. WORC 01609	25 00	
12/14	TINA HOOD 224 PROVIDENCE ST. WORC 01607	50 00	
12/16	ELLEN KASPER 120 GILSON RD SUITWATER, MA 02066	50 00	
12/19	THOMAS BAXTER 38 BJOAKLAND AVE WORC, MA 01605	25 00	
12/23	CHRIS CHRISTO 18 TATTAN FARM RD. WORC 01605	25 00	
Line 9: Total receipts in excess of \$50 (or listed above)			
Line 10: Total receipts \$50 and under* (not listed above)		430 00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		430 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
2/18/12	BRIAN HOOD 224 PROVIDENCE WORC-01607	50.00	
11/9/12	EDWARD THOMAS 37 PARADISE DR. WORCESTER, 01602	10.00	
11/10/12	LORRAINE FOSTER 73 SUMMER HILL AVE WORC 01606	25.00	
11/10/12	CHERYL KENNIE 54 GOLDWAITE RA. WORC 01605	35.00	
11/14/12	JOHN RODGERS 551-SW CUTOFF WORC 01607	25.00	
11/16/12	JAMES LUKES 24 HADWED RA WORC. 01602	25.00	
11/16/12	DARL FRANCO 57 OLEAH ST. WORC. 01602	25.00	
11/15/12	MICHAEL PANTES 19 WATSON LN. RUTLAND, MA 01543	25.00	
11/1/12	THOMAS VENTURA 226 E MOUNTAIN ST. WORC 01606	25.00	
11/16/12	DIRA NICHOLAS 18 OLDE COLONY DR. SHEWS. 01545	25.00	
11/9/12	MARY NOTTA 166 WHITMARSH AVE WORC 01602	50.00	
11/16/12	JOANNE POWELL 15 DODGE LN. CHARLTON, MA 01507	50.00	
11/16/12	LEWIS EVA & ELIDIS 215 NEWELL RD. HOLDEN, MA 01520	50.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)		420.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		420.00	← 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 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

* 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
11/16/15	ALLYS RESTAURANT	58 SHEWSBURY ST WORC, 01604	FUND RAISER	145.50
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	145.50





Form CPF M 102: Campaign Finance Report

Municipal Form
Office of Campaign and Political Finance

RECEIVED
WORCESTER CITY CLERK

2012 JAN 10 PM 2: 51

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates: Reporting Period Beginning

Month	Date	Year
10	22	11

 Ending

Month	Date	Year
12	31	11

Type of report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Full Name of Candidate (if applicable)
Downa M. Colorio
School Committee
Office Sought and District
10 Homer St.
Residential Address
508-450-0104
Tel. No. (optional)

Committee Name
Comm to Elect Downa M. Colorio
Name of Committee Treasurer
MARY COLORIO
Committee Mailing Address
5 HALL ST
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 3609.38
Line 2: Total receipts this period (page 2, line 11) \$ 975.00
Line 3: Subtotal (line 1 plus line 2) \$ 4584.38
Line 4: Total expenditures this period (page 3, line 14) \$ 4042.03
Line 5: Ending balance (line 3 minus line 4) \$ 542.35
Line 6: Total in-kind contributions this period (page 4) \$ 235.00
Line 7: Total (all) outstanding liabilities (page 4) \$ _____
Line 8: Name of bank(s) used COMMERCE 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 (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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 signature (in ink)

Date

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.

This page may be copied 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	
10/27/11	Campaign That Wins, Com.	210 PARK AVE WORCESTER.	POSTCARD	2968	27
11/8/11	NUOVA RESTAURANT	SARENSBURYST. WORC.	ELECTION PARTY	425	00
11/8/11	CRISPANIL PIZZA	50 GREENWOODST. WORC, MA.	VOLANTEERS	52	85
11/11/11	POST OFFICE	WEST SIDE STATION	POSTAGE	58	00
Line 12: Expenditures over \$50				3504	12
Line 13: Expenditures \$50 and under*				537	91
Line 14: TOTAL EXPENDITURES				4042	03

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value	
12/5/11	DAVE TATTLE	1150 WAUWINET Rd. BARRE, MA	ROBO CALLS	225.00	
				Line 15: In-kind over \$50	225.00
				Line 16: In-kind \$50 and under	
				Line 17: Total In-kind	225.00

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.

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	
				Line 18: OUTSTANDING LIABILITIES (ALL)	

Enter on page 1, line 7



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
WORCESTER CITY CLERK

2011 OCT 31 AM 10:50

File with:
City or Town Clerk or Election Commission

WORCESTER, MA

Please print or type all information, except signatures.

Fill in dates:			Month	Date	Year	Month	Date	Year
Reporting Period Beginning	09	03	11	Ending	10	21	11	

Type of report: (Check one)

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

Donna M. Colorio
Full Name of Candidate (if applicable)

SCHOOL COMMITTEE
Office Sought and District

10 HOMER ST.
Residential Address

508-450-0104
Tel. No. (optional)

Comm to Elect Donna M. Colorio
Committee Name

MARY COLORIO
Name of Committee Treasurer

5 HALL ST.
Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>1040.06</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>4500.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>5540.06</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>1930.68</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>3609.38</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>COMMERCE 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, 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:

Mary Colorio
Treasurer's signature (in ink)

10/30/11
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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 signature (in ink)

10-31-11
Date

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/22/11	Breuer Carol Viola Trust 9 Plymouth Rd Worcester, Ma. 01890	500.	Homemaker
9/15/11	Cancelmo Richard 30 Clement St. Worcester, Ma. 01603	100.	
9/21/11	Scott Fitzgibbon's 104 School St. Belmont, Ma. 02478	500.	Law Professor Boston College
9/23/11	Fratantonio Monemic 397 Prospect St. Shrewsbury, Ma. 01545	100.	
9/23/11	Gaffney Michael 1 Bancroft Tower Rd. Worcester, Ma. 01609	100.	
9/23/11	Ludden Shane 10 Home St Worcester, Ma. 01602	100.	
9/1/11	Herr Brian 31 Elizabeth Rd Hepkinton, Ma. 01748	100.	
9/23/11	Krikorian Cynidi 47 Hartford St Watich, Ma. 01760	300.	Consultant Group Acton, Ma.
9/23/11	Larson Joanne 2 Romola Rd Worcester, Ma. 01605	100.	
9/23/11	Larson Paul 2 Romola Rd Worcester, Ma. 01605	100.	
9/20/11	Morgan James 20 Elmwood Rd Northfield, Ma. 01945	100.	
10/13/11	Powell Joanne 15 Lodge Lane Charlton, Ma. 01507	100.	
9/14/11	Rennie Cheryl 54 Goldsmith Rd Worcester, Ma. 01605	100.	
Line 9: Total Receipts over \$50 (or listed above)		2300.00	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		4500.00	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/19/11	Atchew Deborah 73 Whitmarsh Ave Worce. 01606	50.00	
9/19/11	Mufierz Rob 425 Lebanon St. Melrose, MA. 02176	40.00	
9/23/11	Awsop Desiree 7 Chestnut St Worcester, MA. 01606	25.00	
9/23/11	Campanale Kathleen 900 North St. Arlington, VA. 22203	25.00	
9/20/11	Carey Mary 1 N. Sumner Rd. Payton, MA. 01612	50.00	
9/29/11	Cashman Scott 330 Sunderland Rd. Worcester, MA. 01604	25.00	
9/29/11	Colono Hanna 10 Homey St. Worcester, MA. 01602	50.00	
9/1/11	Flanga Brenda 1006 Pleasant St. Worcester, MA. 01602	25.00	
9/23/11	Hadeity Patricia 45 Mystic St. Medford, MA. 02155	20.00	
10/17/11	Evangelidis Paul 2 Russell Calvin Blume Worcester, MA. 01605	25.00	
9/6/11	Franke Caroline 11 Catherine St. Worcester, MA. 01605	50.00	
9/24/11	Franke Caroline 11 Catherine St. Worcester, MA. 01605	25.00	
9/23/11	Gordon Kristine 30 Franconia St. Worcester, MA. 01602	15.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)		425.00	
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

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)
9/1/11	Guardian Gun 2 Bayberry Ln. Worcester, Ma. 01602	25.00	
10/16/11	Hesley Patrick 51 Main St Boylston, Ma.	25.00	
9/7/11	Hood Brian 222 Providence St. Worcester, Ma. 01607	50.00	
9/24/11	Kirkovic Mebra 129 Foxhill blv. Walden, Ma. 01520	50.00	
9/29/11	Johnson Bonnie 5 Pine St. Boylston, Ma.	50.00	
9/23/11	Motta Mary 166 Whit marsh Ave Worcester, Ma. 01606	50.00	
9/21/11	Mylott Alex 42 Mc Kay Ave Sutcliffburg, Ma. 01420	50.00	
9/16/11	Franke Caroline 11 Catherine St. Worcester, Ma. 01605	25.00	
9/17/11	Foster Lorraine 73 Summerhill Ave Worcester, Ma 01606	25.00	
9/23/11	Hanlon Jerome 4 Hlewell St Worcester, 01609	25.00	
9/17/11	Nicholas Alina 18 Old Colony blv. Shrewsbury, Ma. 01545	25.00	
9/23/11	The Pop Committee 267 Neck Street W. Weymouth, Ma. 02191	20.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)		430.00	
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

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)
9/23/11	Pinto Jean 58 Wildrose Ave Worcester, Ma. 01602	25.00	
9/23/11	Phillips Glenn 35 Boardman St Worcester, Ma. 01606	50.00	
9/23/11	Pistone Lawrence 14 Leonardston, Rd. Princeton, Ma. 01541	25.00	
9/23/11	Reed Glenn 70 Brooks Pond Rd. Spencer, Ma. 01562	50.00	
9/23/11	Richard Larry 115C Ridgfield Circle Clinton, Ma. 01510	25.00	
9/23/11	Roy Kimberly 14 Lakeview Circle Sutton, Ma. 01590	20.00	
9/23/11	Shay Cheryl 354 Shrewsbury St Worcester, Ma.	50.00	
9/23/11	Shay John 354 Shrewsbury St. Worcester, Ma.	50.00	
9/7/11	Tribastone Du Anne 83 Melawanda hlv. Worcester, Ma. 01603	25.00	
9/23/11	Tribastone Du Anne 83 Melawanda hlv. Worcester, Ma. 01603	50.00	
9/23/11	Varian Cathy 35 Boardman St. Worcester, Ma. 01606	50.00	
9/23/11	Varley Chester 27 Pleasant St. Holliston, Ma. 01746	25.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)		445.00	
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

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)
9/23/11	Wesley Thomas 190 Kutcher St. Hopedale, MA 01747	50.00	
9/23/11	Williamson Sharon 17 Tewksville Lane Worcester, MA 01609	50.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)		100.00	
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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/6/11	West Side Station Worcester, ma	Chandler St Worcester, ma	Stamps	87.00
9/17/11	Home Depot	130 Gold Star Worcester, MA 01606	Supplies for signs	28.25
9/27/11	Bonnie Johnson	5 Pine St Boylston, ma	Fundraiser	50.82
9/23/11	2AC Catering	26 Hume St Shrewsbury, ma	Fundraiser	115.00
9/24/11	Quick Stop	340 Shrewsbury St. Worcester, ma	Post Cards	626.88
9/30/11	Capitol Promotions	249 N. Keswick Ave Ellenside, PA 19078	yard signs	531.00
10/6/11	CVS Pharmacy	44 W. Boylston St Worcester, ma	Candy for Parade	40.00
10/9/11	CVS Pharmacy	44 W. Boylston St Worcester, ma	Candy for Parade	18.26
9/12/11	Bonnie Johnson	5 Pine St Boylston, ma	office supplies & stamps	110.99
10/12/11	West Side Station	Chandler St Worcester, ma	Stamps	263.00
10/17/11	Staples	571 Boston Tpk. Shrewsbury, ma	office supplies	39.92
10/17/11	Staples	571 Boston Tpk. Shrewsbury, ma	office supplies	9.56
Line 12: Total Expenditures over \$50 (or listed above)				1790.69
Line 13: Total Expenditures \$50 and under* (not listed above)				135.99
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				1926.68

* 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4/8/11	Bard Amya 36 Long Leaff Rd Brylston, MA 01505	100.00	
4/7/11	Crabaron Anna 239 Kelburne Ave Sleepy Hollow, N.Y. 10591	100.00	
4/6/11	Cancelmo Richard 30 Clement St Worcester, MA 01603	100.00	
3/19/11	Colorio Monna 10 Homer St Worcester, MA 01602	100.00	
4/10/11	Colorio Margaret 3 Homer St Worcester, MA 01602	500.00	Retired
3/19/11	Colorio Mary 5 Hill St	500.00	Business Owner, Dimitria Pleights
3/19/11	Colorio John Worcester 01602	500.00	Business Owner, Dimitria Pleights
4/7/11	Cocara James 3 Burgess Rd. Worcester, MA 01609	100.00	
6/23/11	Franco Paul 57 Pleasant St Worcester, MA 01602	100.00	
4/11/11	Frattantonio Domenic 397 Prospect St Shrewsbury, MA 01545	100.00	
4/10/11	Gagnney Mike & Coren 7 Bonchast Rd Worcester, MA 01609	100.00	
4/10/11	Holohan Justin 47 Hartford St Natick, MA 01760	300.00	High Vista Accountant
4/10/11	Krakerian Alebra 129 Fox Hill Dr. Holden, MA 01520	100.00	
4/10/11	Larson Jeanne 2 Ronald Rd Worcester, MA 01605	100.00	
Line 9: Total Receipts over \$50 (or listed above)		2800.00	
Line 10: Total Receipts \$50 and under* (not listed above)		291.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		4811.00	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4/6/11	Omar B.A. 491-green St North Fore, Ma. 01532	100.00	
4/12/11	Polito Karen 557 C Hartford Tpke. Shrewsbury, Ma. 01545	100.00	
4/22/11	Reed Mary Ann 70 Brooks Pond Rd Spencer, Ma. 01562	100.00	
4/10/11	Tagliente Frank 290 Pollara Rd Northbridge, Ma 01534	100.00	
4/7/11	Williamson Clayton 17 Hideswell Ln. Worcester, Ma. 01609	100.00	
Line 9: Total Receipts over \$50 (or listed above)		500.00	
Line 10: Total Receipts \$50 and under* (not listed above)		200.00	
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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4/7/11	Ilin Klarga 1006 Pleasant St Worcester, Ma 01602	25.00	
4/5/11	Enkelade Zaimi 7 Electric St Worcester 01610	50.00	
4/5/11	Evelyn Houry 10 Boncroft Town Rd Worcester, Ma 01609	25.00	
3/19/11	Paul Loyer 446 Main St Whitenville, Ma 01505	10.00	
3/19/11	Rick Schofield 17 Carney St Upbridge, Ma	20.00	
2/5/11	Tina Hood 224 Providence St Worcester, Ma 01607	50.00	
3/30/11	Paul Larson 27 Ronald Rd Worcester, Ma 01605	20.00	
4/6/11	Marshall Houry 57 Lexington Circle Holden, Ma 01520	50.00	
4/6/11	Lew Evangelidis Box 186 Holden, Ma 01520	50.00	
4/6/11	Susanne Hubbard 45 Church St Auburn, Ma 01501	50.00	
4/6/11	Klomenia Shippole 111 Grandview Ave Worcester, Ma 01603	50.00	
4/7/11	David Shortleive 79 Bjorkland Ave Worcester, Ma 01605	25.00	
4/7/11	George Peterson 8 North St Grafton, Ma 01519	25.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)		450.00	
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

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)
4/7/11	Edward Owanison 16 Home St Worcester, MA 01602	50.00	
4/7/11	Bradford Wyatt 38 Gloger St Dorchester, MA 01505	25.00	
4/7/11	Korcy Ship pole 7 Salisbury Crag Worcester, MA 01409	25.00	
4/7/11	Thomas Bayter 38 Bjorklund Ave Worcester, MA 01605	25.00	
4/10/11	Joy C. Anderson 1416 Main St Whitinsville, MA 01588	50.00	
4/10/11	Cheryl Plennie 54 Goldthwaite Rd Worcester, MA 01405	50.00	
4/10/11	Martin Lamb 57 Wingate Rd Holliston, MA 01746	50.00	
4/10/11	Paul Laroge 24 Romola Rd Worcester, MA 01605	50.00	
4/10/11	Patricia King 4 Richards Ave Payton, MA 01612	25.00	
4/10/11	Catherine Varian 35 Conidman St Worcester, MA 01606	25.00	
4/10/11	Lougin Foster 73 Summer Hill Ave Worcester, MA 01606	25.00	
4/10/11	Ronald Richard 32 Moulnd St Worcester, MA 01609	50.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)		450.00	
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

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)
4/10/11	Konstantinos Tziplas 24 Hadwex Rd Worcester, MA. 01602	50.00	
4/10/11	Jean Pinto 58 Wild Rose Ave Worcester, MA. 01602	50.00	
4/10/11	James Murech 15 Hunt Hurst Circle Worcester, MA. 01602	25.00	
4/10/11	Jeanette Comear 6 Ashley Drive Shrewsbury, MA 01545	50.00	
4/10/11	Kathleen Campana 18 Broad St Cherry Valley, MA	25.00	
4/10/11	Jennie Carove 9 Bowden Ave Southbridge, MA. 01550	50.00	
4/10/11	Ronald Motto 166 Whitmarsh Ave Worcester, MA. 01606	50.00	
4/10/11	Chrysanthi Charalambides 43 SO. Kenoy St Worcester, MA. 01602	25.00	
4/10/11	Bill Casey 1 Popmuck Rd Payton, MA 01612	50.00	
4/10/11	Olii Melika 10 Homey St Worcester, MA. 01602	50.00	
4/11/11	Sarah Michael 18 Russell Calvin Blvd. Worcester, MA. 01605	50.00	
4/12/11	Kristina Gordon 30 Franconia St Worcester, MA. 01602	25.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)		500.00	
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

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)
4/12/11	Kathleen Senov 59 Halden St Worcester, Ma 01605	25.00	
4/12/11	Carolyn Franke 1 Catherine St Worcester, Ma 01605	50.00	
4/13/11	Alice Pellerin 720 Grafton St Worcester, Ma 01604	25.00	
4/13/11	Gary Graham 151 Cedar St Haphenton, Ma 01748	50.00	
4/10/11	Ann Morlan 136 Baystate Rd Worcester, Ma 01604	25.00	
4/10/11	Rick Schofield 17 Carney St Uxbridge, Ma	50.00	
4/10/11	Kathy Shemeligan 351 Realisbury St Worcester, Ma 01609	25.00	
4/10/11	Jed Hanlon 4 Henry St Worcester, Ma 01609	50.00	
4/10/11	Glenn Phillips 35 Boardman St Worcester, Ma 01606	20.00	
4/10/11	Marshall Horowitz 57 Huntington Circle Halden, Ma 01520	50.00	
4/16/11	Chris Christ 18 Fatten Farm Rd Worcester, Ma 01605	25.00	
4/16/11	Mathew Mullaney 43 Monadnock Rd Worcester, Ma 01609	50.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)		445.00	
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

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)
4/18/11	Alan Van Wert 43 Theodore Ave. Leominster, Ma 01453	50.00	
4/22/11	C. Paolo 65 Commonwealth Ave Worcester, Ma 01604	6.00	
4/22/11	Dr. Horowitz 57 Huntington Circle Holden, Ma 01520	50.00	
4/27/11	Cecilia Klugandis 3 Lionberry Lane Hopkinton, Ma 01748	25.00	
4/29/11	Michael King 4 Richards Ave Payton, Ma 01612	25.00	
5/17/11	William Kelleher 6 Westwood Dr. Worcester, Ma 01609	50.00	
6/27/11	Susan Smiley 183 Packard St Lancaster, Ma 01523	20.00	
8/19/11	Richard Bluffy 68 Anderson Ave Worcester, Ma 01604	25.00	
8/19/11	Nancy Duffen 38 Byorkland Ave Worcester, Ma 01605	25.00	
8/19/11	Ann Marie Guardiani 97 Waterford Drive Worcester, Ma 01602	25.00	
8/19/11	Sheila Firmin 87 Olean St Worcester, Ma 01602	10.00	
8/19/11	Steven/Julia Roth Child 35 Westwood Drive Worcester, Ma 01609	25.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)		336.00	
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)
6/25/11	Fred Libano 317 Aldridge St. Weybridge, MA 01567	30.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)		30.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		2211.00	← 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.

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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.

This page may be copied 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		
8/17/11	Capital Promotion	PO Box-231 Shrewsbury, MA.	yard Signs	1714	00	
7/25/11	Friends of Worc. Senior Center	Providence St Box-3 Worcester, MA	donation	100	00	
6/6/11	Johnson Bonnie	5 Pine St Boylston, MA	Fund Raiser	66	05 ✓	
4/9/11	Lenis John	23 Kennicott Rd Worcester, MA	Campaign photos	200	00 ✓	
3/28/11	Post 318	180 Greenwood St Worcester, MA	Fund Raiser	150	05 ✓	
9/29/11	Post office	Worcester, MA	Postage	85	80 ✓	
5/9/11	Post office	West Side Station Worc. MA	Postage	215	40 ✓	
4/10/11	2 AC Catering	26 Halloway Rd Shrewsbury, MA	Fund Raiser	187	25 ✓	
3/28/11	Lunch Stop	345 Shrewsbury St Worcester, MA	Bumper Stickers & push cards	345	32 ✓	
5/6/11	Lunch Stop	345 Shrewsbury St Worcester, MA	Post Cards	626	88 ✓	
3/28/11	Staples	511 Post TPK Shrewsbury, MA	Fundraiser	59	38 ✓	
4/9/11	Trader Joes	710 Post TPK Shrewsbury, MA	Fundraiser	77	53 ✓	
8/14/11	Worcester Columbus Parade	PO Box 2856 Worcester, MA	donation	150	00	
6/25/11	Zerof	2660 SW Pkwy Ave Wilsonville, Or.	Cartridge	117	61 ✓	
8/20/11	Zerof	2660 SW Pkwy Ave Wilsonville, Or.	Cartridge	121	86	
				Line 12: Expenditures over \$50	4217	08
				Line 13: Expenditures \$50 and under*	252	86
				Line 14: TOTAL EXPENDITURES	4469	94

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
2/6/11	DONNA COLORIO	10 HOMER ST	Baked goods	100.00
3/30/11	JENNIFER SHIGPOLE	129 West 74 St. N.Y., N.Y	Graphic Design work	150.00
8/14/11	DONNA COLORIO	10 HOMER ST.	Baked goods	100.00
Line 15: In-Kind Contributions over \$50 (or listed above)				350.00
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				350.00

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

