



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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City of Town Clerk of Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/2019 Ending Date: 10/18/2019

Type of Report: (Check one)

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

Paul B. Hart, Sr.
Candidate Full Name (if applicable)

Fall River School Committee
Office Sought and District

70 Warburton Street, Fall River, MA 02720
Residential Address

E-mail: threeharts@comcast.net

Phone # (optional): _____

Committee to Elect Paul Hart
Committee Name

Erin Harrington
Name of Committee Treasurer

996 Elsbree Street, Fall River, MA 02720
Committee Mailing Address

E-mail: erinh2433@gmail.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	2,605
Line 3: Subtotal (line 1 plus line 2)	2,605
Line 4: Total expenditures this period (page 5, line 14)	2,378.36
Line 5: Ending Balance (line 3 minus line 4)	226.64
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:	<u>Fall River Municipal Credit Union</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: Erin Harrington (Treasurer's signature) Date: 10/22/19

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: 10/22/19

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)
Sep 29, 2019	Bruce Assad 486 Nichols Street Fall River, MA 02720	200	Occupation: Attorney Employer: Law Office of Bruce A. Assad
Jul 26, 2019	Peter DeFusco 35 Plains Field Drive Dartmouth, MA 02748	100	
Jul 26, 2019	John & Christine Frank 275 Calvin Street Fall River, MA 02720	100	
Jul 24, 2019	Mark Gustafson 1869 Highland Avenue Fall River, MA 02720	200	Occupation: Contract Manager Employer: Department of Transitional Assistance, Commonwealth of Massachusetts
Oct 18, 2019	Robert Karam 500 Albany Street Fall River, MA 02720	100	
Jul 30, 2019	Florentina Kitchen 339 Reading Street Fall River, MA 02720	75	
Jul 22, 2019	Patrick & Mary Lowney 657 Hanover Street Fall River, MA 02720	150	
Jul 23, 2029	Joseph A. Marshall 323 Kenyon Street Fall River, MA 02720	100	
Oct 18, 2019	James McDonald 1632 N. Laurel Avenue - Apt. 229 Los Angeles, CA 90046	100	
Sep 21, 2019	Michael McHenry 763 Oak Grove Avenue - Apt. 2 Fall River, MA 02720	250	Occupation: General Manager Employer: Colonial Wholesale Beverage
Sep 10, 2019	Joan Menard 4700 North Main Street - Apt. 1-J Fall River, MA 02720	100	
Aug 30, 2019	Brian & Lori O'Neil 9 Rockland Street Dartmouth, MA 02748	60	
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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Jul 24, 2019	Committee to Elect Melissa Panchley 687 Harvard Street Fall River, MA 02720	100	
Sep 10, 2019	Lawrence Pereira 81 Dewey Street Fall River, MA 02720	250	Occupation: Train Conductor Employer: Keolis Commuter Services
Line 9: Total Receipts over \$50 (or listed above)		1,885	
Line 10: Total Receipts \$50 and under* (not listed above)		720	
Line 11: TOTAL RECEIPTS IN THE PERIOD		2,605	← 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
Oct 3, 2019	Darcy E. Nientimp Nursing Scholarship Fund	795 Middle Street Fall River, MA 02721	Tickets for a fund-raiser for the Darcy E. Nientimp Nursing Scholarship Fund	70
Sep 17, 2019	Express Printing	102 County Street Fall River, MA 02723	Yard Signs	138.13
Aug 6, 2019	justyardsigns.com	4880 A1 Distribution Court Orlando, FL 32822	Yard Signs and Stakes	244.24
Aug 23, 2019	justyardsigns.com	4880 A1 Distribution Court Orlando, FL 32822	Yard Signs and Stakes	205
Sep 17, 2019	justyardsigns.com	4880 A1 Distribution Court Orlando, FL 32822	Yard Signs	147.5
Sep 6, 2019	Vistaprint Netherlands BV	Hudsonweg 8 Venlo, The Netherlands 5928LW	Door Hangers	129.06
Aug 27, 2019	WSAR	1 Home Street Somerset, MA 02725	Radio advertisements	160
Sep 25, 2019	WSAR	1 Home Street Somerset, MA 02725	Radio advertisements	840
Line 12: Total Expenditures over \$50 (or listed above)				1,933.93
Line 13: Total Expenditures \$50 and under* (not listed above)				444.43
Line 14: TOTAL EXPENDITURES IN THE PERIOD				2,378.36

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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
			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 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-Kind Contributions over \$50 (or listed above)				0
Line 16: In-Kind Contributions \$50 & under (not listed above)				0
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				0

* 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
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				0