

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report CEIVED Municipal Form TOWN CLERK HAMILTON, MA

Office of Campaign and Political Finance

2022 MAR 30 AM 11: 42

	File with: City or Town Clerk or Election Commission			
Fill in Reporting Period dates: Beginning Date: 3/1	1/22 Ending Date: $3/30/22$			
Type of Report: (Check one)				
	20 devertion alastian very and remort discolution			
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution			
BRIAN SCUDDER Candidate Full Name (if applicable)	BRIAN SCUDDER SCHOOL COMMITTEE CANDIDATE			
Candidate Full Name (if applicable) HWRSD SCHOOL COMMITTEE MEMBER	Committee Name			
Office Sought and District	WILLA SCUDDER Name of Committee Treasurer			
25 PARK STREET, S. HAMILTON, MA 01982	25 PARK STREET, S. HAMILTON, MA 01982			
Residential Address	Committee Mailing Address			
E-mail: BRIAN.J.SCUDDER@GMAIL.COM	E-mail: WILLA.SCUDDER@GMAIL.COM			
Phone # (optional): 617-620-1299	Phone # (optional): 617-620-7131			
SUMMARY BALANCI	F INFODMATION.			
SUMMART BALANCI	E INFORMATION.			
Line 1: Ending Balance from previous report				
Line 2: Total receipts this period (page 3, line 11)	2,102.78			
Line 3: Subtotal (line 1 plus line 2)	2,102.78			
Line 4: Total expenditures this period (page 5, line	(14) 010-78			
Line 5: Ending Balance (line 3 minus line 4)	1,492.00			
Line 6: Total in-kind contributions this period (page	ge 6) 443.85			
Line 7: Total (all) outstanding liabilities (page 7)	775.14			
Line 8: Name of bank(s) used: Bank of A	merica			
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) FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)				
Candidate with 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 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 befinance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	in-kind contributions and liabilities for this reporting period and represents the			

(Candidate's signature)

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.)

report an receipts. Please include your committee name and a page number on each page.)					
Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)		
Date Received					
2/11/20	George Gilpin	Cm (D)	CPA		
5/10/22	George Gilpin 13 Parsons Hill Rd., Wenham, MA	500,00	Bracebrigge Capital LLC		
- 3 - V	Edward Laubinar	0 -0 (0	Director		
3/22/22	Edward Laubinger 346 Bay Rd., S. Hamilton MA	250.60	Alexion Pharmaceuticals		
3/22/22	Louis Levesque N 162 Pine Tree Dr. S. Hamilton MF	167.00			
1120120	The rie vr. S. Hamilton WII	101,			
2/2 /2-	Eric Roensch	1 000 (0	Co-Founder		
3/22/22	49 Miles River Rd. S. Hamilton	1,000.60	Co-Founder Iron Tree Service		
	M				
	-				
	-				
Line 9: Total Rece	ipts over \$50 (or listed above)	1,917.00			
Line 10: Total Receipts \$50 and under* (not listed above)					
Line 11: TOTAL I	RECEIPTS IN THE PERIOD	2,102.78	← Enter on page 1, line 2		
* If you have itemize	d receipts of \$50 and under include them in lin	0 Line 10 show	Id include only those receipts 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
1			
The state of the s			
ine 9: Total Recei	ots over \$50 (or listed above)		
	pts \$50 and under* (not listed above)		
	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.)

report 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	
3/17/22	Choice Graphics	140 Central Rowley MA	Signs	610.78	
		Line 12: Total Expenditures ov	rer \$50 (or listed above)	610.78	
		Line 13: Total Expenditures \$50	0 and under* (not listed above)	0	
	7 7	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	610.78	

^{*} 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)

		TEXTENDITORES (C	T	r	
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
	(aiphabettear issuing)	Address	Turpose or Expenditure	Amount	
				<u> </u>	
I management					
1					
	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				
		include them in line 12. Line 13 sk			

^{*} 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
3/23/22	Jamie Smorczewski	86 Highland Hamilton MA	hall vental	91.67
3/23/22	John Maestranzi	PO Box 7 Wenham MA	food	219.09
3/23/22	John Maestranzi	PO Box 7 Wenham MA	info cards	76.87
3/23/22	Amanda Roensch	49 Miles River Hamilton MA	info cards	56.22
		Line 15: In-Kind Contributions	s over \$50 (or listed above)	443.85
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line $6 \rightarrow$	Enter on page 1, line $6 \rightarrow$ Line 17: TOTAL IN-KIND CONTRIBUTIONS 443.85		

^{*} 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
3/25/22	Adpro Design	15 Spring St Peabody MA	Signs	212,50
	Choice Graphics	140 Central Rawley MA	Flyers	171.69
3/29/22	Choice Graphics	140 Central Rawley MA	Signs	390.95
		J		
	Enter on page 1, line $7 \rightarrow$	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	775.14