

Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance TOWN CLERK TOWN CLERK

OI IVASSAGIRASORIS	File with: City or Town Clerk or Election Commission	
Fill in Reporting Period dates: Beginning Date: 01/01	/2023 Ending Date: 02/05/2023	
Type of Report: (Check one) Bth day preceding preliminary 8th day preceding election	⊠ 30 day after election	
	Committee for a United Hardwick	
Candidate Full Name (if applicable)	Committee Name Mary Ann Swistak	
Office Sought and District	Name of Committee Treasurer P.O. Box 428 Hardwick, MA 01037	
Residential Address	Committee Mailing Address	
E-mail:	E-mail: unitehardwick@gmail.com	
Phone # (optional):	Phone # (optional): n/a	
SUMMARY BALANC	E INFORMATION:	
Line 1: Ending Balance from previous report	3,142.85	
Line 2: Total receipts this period (page 3, line 11)	10,500	
Line 3: Subtotal (line 1 plus line 2)	13,639.7	
Line 4: Total expenditures this period (page 5, line	e 14) 13,636.43	
Line 5: Ending Balance (line 3 minus line 4)	3.27	
Line 6: Total in-kind contributions this period (pa	ge 6) 0	
Line 7: Total (all) outstanding liabilities (page 7)	0	
Line 8: Name of bank(s) used: Country Bank		
activity, of all persons acting under the authority or on behalf of this committee in acting incurred any liabilities nor made any expenditures on my behalf during this reporting	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: Date: x only) best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions,	
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, 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	
Signed under the penalties of perjury:	(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.)

Date Received	Name and Residential Address , (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
01/03/2023	Commonwealth Racing, LLC P.O. Box 2311 Framingham, MA 01703	10,500	
Line 9: Total Rec	eipts over \$50 (or listed above)	10,500	RECEIVED
	ceipts \$50 and under* (not listed above)		FEB - 6 2023
	RECEIPTS IN THE PERIOD	10,500	← Enter on page 1, line 2 WN CLERK

^{*} 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 Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Rece	sipts over \$50 (or listed above)		RECEIVED
Line 10: Total Rec	eipts \$50 and under* (not listed above)		FEB - 6.2020
Line 11: TOTAL	RECEIPTS IN THE PERIOD	a O. Line 10 show	Enter on page 1, line 2 Linely de 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 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			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
01/04/2023	Turley Publications	24 Water Street Palmer, MA 01069	Newspaper ad	2,206
01/04/2023	Winning Campaign Strategies	399 River Road Hudson MA 01749	Mailer printing	287.83
01/04/2023	Connolly Printing	178 Gill Street Woburn, MA 01801	Mailer printing and postage	4,449.77
01/09/2023	Connolly Printing	178 Gill Street Woburn, MA 01801	Doorhangers	489.37
01/09/2023	Connolly Printing	178 Gill Street Woburn, MA 01801	Mailer printing and postage	5,100.03
01/13/2023	Hardwick Crossing	262 Lower Road Gilbertville, MA 01031	Campaign thank you	853.43
01/14/2023	Town of Hardwick	307 Main Street P.O. Box 575 Gilbertville, MA 01031	Donation to Hardwick Youth Center	250
		Line 12: Total Expenditures or	ver \$50 (or listed above)	13,636.43
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	13,636.43

^{*} 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)

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			
	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.

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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>T</i> :			
		974		
				k:
		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			

FEB - 8 ZUZU

^{*} 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
	·	p		
			10:	
	100			

			esc.	
		MV.		
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	0

FEB = 6 2023