



**Form CPF M 102A: Amendment to Campaign Finance Report  
Municipal Form  
Office of Campaign and Political Finance**

Commonwealth of Massachusetts

File with: City or Town Clerk or Election Commission

**Report Being Amended:** Year: 2018 Reporting Period: Beginning Date: 1/2/18 Ending Date: 3/20/18

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

George Ferdinand  
Candidate Full Name (if applicable)

56 Pratt St - Tewksbury MA 01876  
Residential Address

Board of Selectmen  
Office Sought and District

E-mail: georgeferdinand@mail.com

Phone # (optional): 781-392-5125

Committee to Elect George Ferdinand  
Committee Name

Maria Zaroulis  
Name of Committee Treasurer

20 Longmeadow Rd. Tewksbury MA 01876  
Committee Mailing Address

E-mail: maria.zaroulis@gmail.com

Phone # (optional): 978-551-3773

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period	<u>510.00</u>
Line 3: Subtotal	<u>510.00</u>
Line 4: Total expenditures this period	<u>375.29</u>
Line 5: Ending Balance	<u>134.71</u>
Line 6: Total in-kind contributions this period	<u>540.00</u>
Line 7: Total (all) outstanding liabilities	<u>0</u>
Line 8: Name of bank(s) used:	<u>Enterprise Bank + Trust</u>

TOWN CLERK  
BOARD OF REGISTRARS  
TEWKSBURY, MA  
18 APR -9 PM 10:30

The original filing of the above-referenced campaign finance report is being amended for the following reason(s):

Corrections Made: Reporting Period dates  
Affidavit of Candidate  
Date Paid - Expenditures  
Address of Donation over \$200.<sup>00</sup>

All donations in kind are in process of being paid back to all businesses. This will be reflected on next Campaign Finance Report.

Signed under the penalties of perjury:

Signed under the penalties of perjury:

George Ferdinand  
(Candidate's signature) Date: 4/8/18

Maria Zaroulis  
(Treasurer's signature) Date: 4/8/18



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/2/18 Ending Date: 3/20/18

Type of Report: (Check one)

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

George Ferdinand  
Candidate Full Name (if applicable)  
Board of Selectmen  
Office Sought and District  
56 Pratt St. Tewksbury MA 01876  
Residential Address  
E-mail: georgeferdinand@mail.com  
Phone # (optional): 781-392-5125

Committee to Elect George Ferdinand  
Committee Name  
Maria Zaroulis  
Name of Committee Treasurer  
20 Longmeadow Rd. Tewksbury MA  
Committee Mailing Address  
E-mail: maria.zaroulis@gmail.com  
Phone # (optional): 978-551-3773

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>510.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>510.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>375.29</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>134.71</u>
Line 6: Total in-kind contributions this period (page 6)	<u>540.00</u>
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	<u>Enterprise Bank</u>

TOWN CLERK  
BOARD OF REGISTRARS  
TEWKSBURY, MA

#### 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: Maria Zaroulis (Treasurer's signature) Date: 4/8/18

#### 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: George Ferdinand (Candidate's signature) Date: 4/8/18

## 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)
2/24/18	Terry Desmond	\$35. <sup>00</sup>	
2/24/18	Mike Evans	\$40. <sup>00</sup>	
2/18/18	Patty Ferdinand	\$25. <sup>00</sup>	
2/24/18	Mary Fortunata	\$40. <sup>00</sup>	
2/24/18	Sheila Fortunata 31 Ronald Dr. Tewksbury, MA 01876	\$60. <sup>00</sup>	Retired
2/24/18	Bill Keough	\$30. <sup>00</sup>	
2/24/18	David Saunders	\$10. <sup>00</sup>	
2/24/18	Jeff Saunders	\$16. <sup>00</sup>	
2/24/18	Paul Saunders	\$9. <sup>00</sup>	
2/24/18	Peter Saunders	\$10. <sup>00</sup>	
2/24/18	Frank West	\$25. <sup>00</sup>	
2/24/18	Hope Zaroulis 141 Nesmith St. #6 Lowell, MA 01852	\$200. <sup>00</sup>	Retired
Line 9: Total Receipts over \$50 (or listed above)		500. <sup>00</sup>	
Line 10: Total Receipts \$50 and under* (not listed above)		10. <sup>00</sup>	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		<b>510.<sup>00</sup></b>	← Enter on page 1, line 2

TOWN CLERK  
 BOARD OF REGISTRARS  
 TEWKSBURY, MA  
 18 APR - 5 PM 10:00

\* 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
3/3/18	George Ferdinand	56 Pratt St. Tewksbury, MA 01876	Knights of Columbus Hall Rental	\$330. <sup>00</sup>
3/3/18	Patty Ferdinand	56 Pratt St. Tewksbury, MA 01876	Party Supplies	\$21.31
3/3/18	Maria Zaroulis	20 Longmeadow Rd. Tewksbury, MA 01876	office/Bookkeeping Supplies	23.98
Line 12: Total Expenditures over \$50 (or listed above)				375.29
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				375.29

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 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
2/23/18	Fresh Looks Salon	1830 Main St. Tewksbury, MA 01876	Gift Certificate	\$50
2/19/18	RT. 38 Tattoo Company	2297 Main St. Tewksbury, MA 01876	Gift Certificate	\$150
2/19/18	RT. 38 Tattoo Company	2297 Main St. Tewksbury MA 01876	Gift Certificate	\$150
2/23/18	Wicked Cheesy	1079 Main St. Tewksbury MA 01876	Gift Certificate	\$15.00
2/23/18	Piezanos Pizza	2290 Main St. Tewksbury MA 01876	Gift Certificate	\$25.00
2/23/18	The Pushcart Cafe	1777 Main St. Tewksbury MA 01876	Gift Certificate	\$25.00
2/23/18	Mavericks Restaurant	2212 Main St. Tewksbury MA 01876	Gift Certificate	\$25.00
2/23/18	Painting Under the Tree Cook - Influence	15 Sherman Rd. N. Reading MA 01864	Gift Certificate	\$100.00
Line 15: In-Kind Contributions over \$50 (or listed above)				540.00
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Enter on page 1, line 6 → <b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>				540.00

\* 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 → <b>Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)</b>				

JIM CLARK  
 CLERK  
 BOARD OF REGISTRARS  
 TELECOMMUNICATIONS  
 MA  
 10-30-22