



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: 3-1-18 Ending Date: 3-30-18

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

Brian Dick
Candidate Full Name (if applicable)
Selectman
Office Sought and District
31 Bopete Lane Tewksbury
Residential Address
E-mail: briandick@verizon.net
Phone # (optional): _____

Committee to Elect Brian Dick
Committee Name
Christopher Dick
Name of Committee Treasurer
31 Bopete Lane Tewksbury
Committee Mailing Address
E-mail: chrisdick@trinityems.com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>2600</u>
Line 3: Subtotal (line 1 plus line 2)	<u>2600</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>876.56</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>1723.44</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>Enterprise BANK and TRUST</u>

TOWN CLERK
BOARD OF REGISTRARS
TEWKSBURY, MA
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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: Christopher E. Dick (Treasurer's signature) Date: 3/29/18

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: [Signature] (Candidate's signature) Date: 3/29/18

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)
2/15/18	Brian Dick 31 Popete Lane Tewks	\$100	President, Dick Insurance Agency
2/15/18	Chris and Elizabeth Dick 87 Catamount St. Tewksbury, MA 01876	100	
2/15/18	Cary Sepe 1221 Westford St. Lowell, MA 01851	150	
2/15/18	John and Maureen Foley 22 Karen Lee Lane Tewksbury, MA 01876	100	
2/15/18	John Chermak P.O. Box 1817 Lowell, MA 01853	150	
2/22/18	William DeGorrio 17 Cleghorn Lane Tewksbury, MA 01876	50	
2/22/18	Patrick Catino 31 Arrowhead Drive Saugus, MA 01906	250	owner, Tewksbury Sports Club
2/22/18	Lucinda Catino 31 Arrowhead Drive Saugus, MA 01906	250	owner, Tewksbury Sports Club
2/22/18	Margaret and Paul Norton 60 Preservation Lane Tewksbury, MA 01876	100	
2/22/18	Bill and Beverly Collins 9 Winter St. Tyngsboro, MA 01879	100	
2/22/18	Shelli + Tom Ryan 181 Fox Run Road Tewksbury, MA 01876	100	
2/22/18	Dennis Connors 38 Westview Road Lowell, MA 01851	100	
Line 9: Total Receipts over \$50 (or listed above)		1500	
Line 10: Total Receipts \$50 and under* (not listed above)		50	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1550	← 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)
2/22/18	John Donahue 917 North Street Tewksbury, MA 01876	100	
2/22/18	Rosanne Riddick 22 Brasfield Rd. Westford, MA	50	
2/22/18	Kim and Gary Brown 120 Judique Rd. Tewksbury, MA 01876	100	
2/22/18	Arthy and Bob Bennett 46 Harold Lane Tewksbury, MA 01876	150	
2/22/18	Heather Matrezone 5 Green Valley Drive Chelmsford, MA 01824	50	
2/22/18	Brian and Mary Aylward 95 Barbara D Lane Tewksbury MA 01876	100	
2/22/18	JAY and Susan TIMMINS 1411 Ardover St. Tewksbury MA 01876	100	
2/22/18	Kristin and Phil Kilmene 38 Bridal Path Tewksbury, MA 01876	200	
2/22/18	Margie Miller 246 Nesmith St. Lowell, MA 01852	50	
2/22/18	Joe and Donna Gill 12 Ellington Road Tewksbury, MA 01876	50	
2/22/18	Stanford Janet Barba 9 Spittall Lane Salem, MA 01970	100	

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Line 9: Total Receipts over \$50 (or listed above)	850
Line 10: Total Receipts \$50 and under* (not listed above)	200
Line 11: TOTAL RECEIPTS IN THE PERIOD	1050

← 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
3/5/18	Carbon Colors	1274 LAKEVIEW AVE DRACUT, MA 01826	Signs	876.56
Line 12: Total Expenditures over \$50 (or listed above)				876.56
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				876.56

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			<i>[Signature]</i>	

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* 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

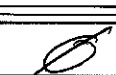
Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-Kind Contributions over \$50 (or listed above)				
Line 16: In-Kind Contributions \$50 & under (not listed above)				
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)	

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