

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance



Fill in Reporting Period dates: Beginning Date: 10/25/2 **Ending Date:** Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after election vear-end report dissolution GREGORY M SHANAHAN Candidate Full Name (if applicable) COMM TO ELECT GREG SHANAHAN

Committee Name COUNCILOR AT LARGE
Office Sought and District STEPHEN SHINNEY Residential Address TOSA MIDDLE ST WEYMOUTH MA OAIRY Committee Mailing Address E-mail: Ster Oster shancher com E-mail: 5 rec@ crecshorchan.com Phone # (optional): Phone # (optional): SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report 407 97 Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) 006 68 **Line 5:** Ending Balance (line 3 minus line 4) **Line 6:** Total in-kind contributions this period (page 6) 2,538,56 **Line 7:** Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used: COASTAL HERITAGE BANK 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, disburgments, 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 best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, repeipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all person acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55. Date: 1 18 22 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)
10/31/21	JOE KELLY 7, INDEPENDENCE LN HINGHAM MA 02043	480.25	IBEW LOCAL #103
10/5/21	ELEVATOR CONST COCAL 4 SO PARK ST DORCHESTER MA 02121	\$60.00	PAC
9/29/21	SOT PLEASANT ST WEYMOUTH MA OLIFO	100	
10/4/21	PIPEFITTERS 537 40 ENTERPRISE ST DORCHESTER MA 02125	200	COPE FUND
10/25/21	MARY + JAMES RYAU 178 PLEASANT ST WEYMOUTH, MA OUISO	1,000	RETIRED
9/20/21	MARION HESSEL 26 BELL RD DEYMONTH MA OBIEF	48.02	
Line 9: Total Recei	pts over \$50 (or listed above)	\$2,328.27	-
Line 10: Total Rece	ipts \$50 and under* (not listed above)	150	
	RECEIPTS IN THE PERIOD	\$2,375.27	← 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)
ine 9: Total Receip	ots over \$50 (or listed above)		
ne 10: Total Recei	pts \$50 and under* (not listed above)		
ine 11: TOTAL R	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 expen		nittee name and a page number or	each page.)	
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
11/1/21	BOYDS DIRECT	STONEHAM, MA	MAILER POSTAGE	\$5,228.25
11/1/21	BOYDS DIRECT	STONEHAM MA	MAILER PRINTING	\$5,744,50
	CHRIS	489 WASHINGTON ST NORWELL, MA	REIMBURSEMENT DIGITAL ADS	\$4,033,73
			DESIGN + DECLUERY, MAIL DESIGN, PRINTING + DELIVERY	
			DIRECT MAIL POSTAGE! VIDEO PRODUCTION + WEB DOMAIN	
		Line 12: Total Expenditures over	\$15,00% CE	
Line 13: Total 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.				\$15,000,65

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid	A ddwa-	Dumas CE	
Date Palu	(alphabetical listing)	Address	Purpose of Expenditure	Amount
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and under* (not listed above)		
	.			
		Line 14: TOTAL EXPENDIT	URES IN THE PERIOD nould include only those expenditures	

^{*} 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	¥7=1
Date Received	From whom Received	Residential Address	Description of Contribution	Value
1				
1 1				
1				
1				
2:				
		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 →	6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

^{*} 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.

Page 6

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

Page 7