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: 03/31/2015 Ending Date: 04/23/2015

Type of Report: (Check one)

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

Christopher P. Mitchell Candidate Full Name (if applicable)	Committee to Elect Chris Mitchell Committee Name
Selectmen - Foxboro Office Sought and District	Michael J Kominsky Jr Name of Committee Treasurer
9 Spruce St, Foxborough MA 02035 Residential Address	9 Spruce St, Foxborough MA 02035 Committee Mailing Address
Telephone Number (optional): 508-543-6514	Telephone Number (optional): 508-698-0624

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	-0-
Line 2: Total receipts this period (page 3, line 11)	$5,240.00
Line 3: Subtotal (line 1 plus line 2)	$5,240.00
Line 4: Total expenditures this period (page 5, line 14)	$4,664.16
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period (page 6)	$86.00
Line 7: Total (all) outstanding liabilities (page 7)	-0-
Line 8: Name of bank(s) used:	Foxborough Federal Savings

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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: Michael J Kominsky Jr (Treasurer's signature) Date: 4/23/2015

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: (Candidate's signature) Date: 4/23/2015

Chris Mitchell 2015

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)
4/1/15	Baller Robert 7 Weldon Farms Rd Fox	100.00	
4/8/15	Beaton, John 14 Joanna Dr Fox	200.00	
4/10/2015	Coutinho, Nicolas 145 South St Fox	200.00	
4/11/2015	Duffey, Paul 23 Pond Ave Fox	300.00	
3/20/2015	Finn Jr, Jame 60 Leonard St Fox	100.00	
4/15/2015	Griffin, Dianne 8 Joseph Rd Fox	400.00	
3/16/2015	Harrington, Larry 22 Highland Rd Westford MA	100.00	
4/14/2015	Hastins, Joseph 112 Summer St Fox	100.00	
3/12/2015	Lalley, Joseph 61 Granite St Fox	100.00	
4/9/2015	Lecier, Amanda 130 Forest St Franklin MA	200.00	
3/11/2015	MacDonald Mary 4 Robert St Fox	100.00	
3/25/2015	McGinty, Cindy Bloomfield 31 Pebble Beach Dr. CT.	300.00	

Line 9: Total Receipts over $50 (or listed above)	Next Pg	
Line 10: Total Receipts $50 and under* (not listed above)	Next Pg	
Line 11: TOTAL RECEIPTS IN THE PERIOD	Next Pg	← 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.

Chris Mitchell 2015

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)
3/24/2015	McGowan Stephanie 19 Rhodes Ave, Fox	100.00	
4/15/2015	Mitchell, Christopher 9 Spruce St, Fox	700.00	
4/10/2015	Napoli, Frank 40 Pine Acres Rd Fox	200.00	
4/8/2015	Oakes, Timothy 10 Austin Lane Fox	300.00	
4/9/2015	Pacelle, Therese 155 North St Fox	400.00	
4/4/2015	Pagne Teresa 6 Joseph Rd Fox	200.00	
4/7/2015	Shatz, Clifford 83 Willow St Fox	540.00	
4/13/2015	Thrasher, James 12 Kathryn Rd Fox	100.00	

Line 9: Total Receipts over $50 (or listed above)	$4,740.00
Line 10: Total Receipts $50 and under* (not listed above)	$500.00
Line 11: TOTAL RECEIPTS IN THE PERIOD	5240.00 ← 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.

Chris Mitchell 2015

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
4/17/15	Foxboro Reporter	36 Mechanic St, Foxboro	Advertisement	294.90
4/18/15	Foxboro Reporter	" "	Advertisement	619.29
4/19/15	Mitchell, Packe	9 Spruce St, Foxboro	Signs Graphic Images Plainville MA #68104	$1,580.47
4/19/15	" "	" "	Website Hostgator.com DS11 Signup - TX	$ 119.61
4/21/15	Priority Printing + Mailing Services	122 Will Drive Canton MA 02021	Printing Services	1,289.89
4/23/15	"	"	Printing Services	$ 300.00
4/23/15	Spectrum Litho	112 Will Drive Canton MA 02021	Printing Services	$ 460.00

Line 12: Total Expenditures over $50 (or listed above)	Next
Line 13: Total Expenditures $50 and under* (not listed above)	-0-
Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD**	Next

* 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)	$4664.16
Line 13: Expenditures $50 and under* (not listed above)	-0-
Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD**	4664.16

* 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
3/25/2015	David Lisowski	11 Fales Place Foxboro MA	Strappings/Wed	$ 86.00
		Line 15: In-Kind Contributions over $50 (or listed above)		$ 86.00
		Line 16: In-Kind Contributions $50 & under (not listed above)		
Enter on page 1, line 6 →		**Line 17: TOTAL IN-KIND CONTRIBUTIONS**		$ 86.00

* 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.

Chris Mitchell 10875

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)** 0