



**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: 2019 Reporting Period: Beginning Date: 1/1/19 Ending Date: 3/19/19

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

Anne Marie Stronach
Candidate Full Name (if applicable)
14 Pillsbury Ave. Tewksbury, MA 01876
Residential Address
Tewksbury Board of Selectmen
Office Sought and District

E-mail: annemariestronach@gmail.com

Phone # (optional): _____

Committee to Elect Anne Marie Stronach
Committee Name
Erin Buckley

Name of Committee Treasurer
14 Pillsbury Ave. Tewksbury, MA 01876
Committee Mailing Address

E-mail: annemariestronach@gmail.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>100.15</u>
Line 2: Total receipts this period	<u>2850.00</u>
Line 3: Subtotal	<u>2950.15</u>
Line 4: Total expenditures this period	<u>2104.19</u>
Line 5: Ending Balance	<u>845.96</u>
Line 6: Total in-kind contributions this period	<u>250.00</u>
Line 7: Total (all) outstanding liabilities	<u>482.42</u>
Line 8: Name of bank(s) used:	<u>Tewksbury Federal Credit Union</u>

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 TOWN CLERK
 BOARD OF REGISTRARS
 TEWKSBURY, MA

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

Expenditures and reimbursements were notated on the incorrect forms. Amended report shows correct notation.

Signed under the penalties of perjury:

Signed under the penalties of perjury:

Anne Marie Stronach
(Candidate's signature)

Date: 4.8.19

Erin Buckley
(Treasurer's signature)

Date: 4/1/19



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: 1/1/19 Ending Date: 3/19/19

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

Anne Marie Stronach
Candidate Full Name (if applicable)

Tewksbury Board of Selectman
Office Sought and District

14 Pillsbury Ave. Tewksbury, MA 01876
Residential Address

E-mail: **annemariestronach@gmail.com**

Phone # (optional): _____

Committee to Elect Anne Marie Stronach
Committee Name

Erin Buckley
Name of Committee Treasurer

14 Pillsbury Ave. Tewksbury, MA 01876
Committee Mailing Address

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	100.15
Line 2: Total receipts this period (page 3, line 11)	2850.00
Line 3: Subtotal (line 1 plus line 2)	2950.15
Line 4: Total expenditures this period (page 5, line 14)	2104.19
Line 5: Ending Balance (line 3 minus line 4)	845.96
Line 6: Total in-kind contributions this period (page 6)	250
Line 7: Total (all) outstanding liabilities (page 7)	482.42
Line 8: Name of bank(s) used:	Tewksbury Federal Credit Union

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: Erin Buckley (Treasurer's signature) Date: 4/1/19

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: _____

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)
3/10/19	David Barletta 156 Whittemore St Tewksbury, MA 01876	\$100	
3/1/19	Arthy Bennett 40 Harold Pl. Tewksbury, MA 01876	\$50	
3/1/19	Eilleen O'Connor Bernal 257 Mt. Vernon St. Lawrence, MA 01843	\$25	
3/1/19	Liz Carey 50 Langley Lane Tewksbury, MA 01876	\$100	
3/1/19	Tom Cooke 64 Arlington St. Tewksbury, MA 01876	\$200	Retired
3/1/19	J.A. & M. Cummings 12 Canterbury Dr. Norwood, MA 02062	\$150	
3/1/19	Maria Cutelis 441 Whipple Rd. Tewksbury, MA 01876	\$50	
3/1/19	Brian Dick 31 Bopete Lane Tewksbury, MA 01876	\$50	
3/1/19	Ann Donnelly 8 Westland Dr. Tewksbury, MA 01876	\$100	
3/1/19	James Duffy 6 Virginia Rd Tewksbury, MA 01876	\$100	
3/10/19	Vincent Fratalia 81 Windsor Dr Tewksbury, MA 01876	\$50	
3/17/19	Leslie Frost 20 Lancaster Drive Tewksbury, MA 01876	\$50	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

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 TEWKSBURY, MA

* 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)
3/1/19	Lorna Garey 63 McLaren Rd Tewksbury, MA 01876	\$25	
3/1/19	Daniel Gaudette 441 Whipple Rd. Tewksbury, MA 01876	100	
3/1/19	David Gay 5 DeCarolis Dr. Tewksbury, MA 01876	\$50	
3/1/19	Donna Gill 12 Ellington Rd. Tewksbury, MA 01876	\$100	
3/1/19	Marc Ginsburg 77 New York Rd. Tewksbury, MA 01876	\$500	Self Employed
3/1/19	Donna Hignnis 296 Astle St. Tewksbury, MA 01876	\$50	
2/2/19	Jay Kelley 22 Karen Lee Road Tewksbury, MA 01876	\$100	
3/1/19	Jay Kelly 79 Salem Rd. Tewksbury, MA 01876	\$100	
3/1/19	Lisa Kuegler 203 Kendall Road Tewksbury, MA 01876	\$50	
3/1/19	Rosemary Moran 2 Shawsheen Rd. Lawrence, MA 01843	\$25	
3/1/19	Krissy Polimeno 58 Bridle Path Tewksbury, MA 01876	\$100	
2/2/19	Nancy Reed 55 Polaris Lane Tewksbury, MA 01876	\$100	
3/1/19	David Robertson, Sr. 41 David Morris Rd Tewksbury, MA 01876	\$50	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

TOWN CLERK
 BOARD OF REGISTRARS
 TEWKSBURY, MA
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* 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)
3/1/19	Jerry Selissen 80 Redgate Road Tewksbury, MA 01876	\$100	
3/1/19	Bruce Shick 30 Lucille Dr Tewksbury, MA 01876	\$75	
3/1/19	Karen Silva 254 North Street Tewksbury, MA 01876	\$25	
3/17/19	Barbara Spada 160 Kendall Road Tewksbury, MA 01876	\$25	
3/1/19	Bonnie Spiegel 119 Mt. Vernon Road Tewksbury, MA 01876	\$50	
3/1/19	John Stadt 666 Whipple Road Tewksbury, MA 01876	\$50	
3/1/19	Ruth Unger 160 Cardigan Rd Tewksbury, MA 01876	\$50	
3/1/19	Joseph Vitale 51 Lancaster Dr. Tewksbury, MA 01876	\$100	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		2850	← Enter on page 1, line 2

TOWN CLERK
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 TEWKSBURY, MA
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* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.



Form CPF R 1: Itemization of Reimbursements

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

Office of Campaign and Political Finance
One Ashburton Place, Room 411
Boston, MA 02108
(617) 979-8300

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 TEWKSBURY, MA

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

	Date of Reimbursement: <input style="width: 80%;" type="text" value="3/10/19"/>
Name of Individual Being Reimbursed:	<input style="width: 90%;" type="text" value="Anne Marie Stronach"/>
Committee Name:	<input style="width: 90%;" type="text" value="Committee to Elect Anne Marie Stronach"/>
CPF ID Number (if applicable):	<input style="width: 200px;" type="text"/> Telephone Number (optional): <input style="width: 200px;" type="text"/>

ITEMIZE EXPENDITURES IN EXCESS OF \$50

Date Paid	Vendor Name	Vendor Address	Purpose of Expenditure	Amount
3/1/19	Tewksbury Country Club	1880 Main Street Tewksbury, MA 01876	Room and food rental	205.44
2/21/19	Woburn Daily Times	1 Arrow Drive Woburn, MA 01801	Small ad	\$213.75
3/1/19	Woburn Daily Times	1 Arrow Drive Woburn, MA 01801	Recurring ads	\$1080
2/27/19	Thurman Prints	117 Tanner Street Unit 2 Lowell, MA 01852	Flyers	\$270
2/23/19	USPS	451 King Street Littleton, MA 01460	Stamps	\$35

(Include items listed on Page 2) →	Line 1: Expenditures in excess of \$50 (itemized above):	<input style="width: 90%;" type="text" value="1859.19"/>
	Line 2: Expenditures \$50 or under (not itemized):	<input style="width: 90%;" type="text"/>
	Line 3: TOTAL AMOUNT REIMBURSED:	<input style="width: 90%;" type="text" value="1859.19"/>

Signed under the penalties of perjury:

 Signature of Candidate / Treasurer

Date:

Please prepare a separate report for each reimbursement check issued by the committee.

