

RECEIVED

*By Town Clerk at 1:30 pm, Jan 18, 2023*



Form CPF M 102-0: Campaign Finance Report  
Municipal Form  
Office of Campaign and Political Finance

City or Town of: Maynard

Reporting Period: Beginning: 1-1-2022 (MM/DD/YYYY) Ending: 12-31-2022 (MM/DD/YYYY)

Type of Report: (Check One)  8th day preceding preliminary/primary  8th day preceding election  30th day following election (town or special)  20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.



Commonwealth  
of Massachusetts

Form CPF M 102-0: Campaign Finance Report  
Municipal Form  
Office of Campaign and Political Finance

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JAN 03 2023

## Town Clerk's Office

Maynard, MA 01754

*Please print or type all information, except signatures.*

City or Town of: MAYNARD

Reporting Period: Beginning: \_\_\_\_\_ Ending: 12/31/2022  
(MM/DD/YYYY) (MM/DD/YYYY)

Type of Report: (Check One)

8th day preceding preliminary/primary     8th day preceding election     30th day following election (town or special)     20th day of January (Year-End report)

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**Town Clerk's Office**  
*or type all information, except*  
**Maynard, MA 01754**

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**Town Clerk's Office**  
Please print or type all information, except signatures.

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✓ 3. I certify that I do not have a political committee.

**RECEIVED**

By Town Clerk at 11:41 am, Dec 29, 2022

Commonwealth  
of Massachusetts**Form CPP 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: Jan 1, 2022 Ending Date: Dec 31, 2022

Type of Report: (Check one)

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

Hilary Griffiths

Candidate Full Name (if applicable)

Maynard School Committee

Office Sought and District

14 Maybury St, Maynard, MA 01754

Residential Address

E-mail: hilarygriffiths@gmail.com

Phone # (optional): \_\_\_\_\_

Hilary Griffiths for School Committee

Committee Name

Jessica Teague

Name of Committee Treasurer

2 Whitney Ave, Maynard, MA 01754

Committee Mailing Address

E-mail: jessicaeteague@gmail.com

Phone # (optional): \_\_\_\_\_

**SUMMARY BALANCE INFORMATION:****Line 1:** Ending Balance from previous report

461.36

**Line 2:** Total receipts this period (page 3, line 11)

0

**Line 3:** Subtotal (line 1 plus line 2)

461.36

**Line 4:** Total expenditures this period (page 5, line 14)

38

**Line 5:** Ending Balance (line 3 minus line 4)

423.36

**Line 6:** Total in-kind contributions this period (page 6)

0

**Line 7:** Total (all) outstanding liabilities (page 7)

0

**Line 8:** Name of bank(s) used: Citizens 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, 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:

(Treasurer's signature)

Date: Dec 31, 2022**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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Candidate's signature)

Date: 12/29/2022

## **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.)

Line 9: Total Receipts over \$50 (or listed above) 0

Line 10: Total Receipts \$50 and under\* (not listed above) 0

**Line 11: TOTAL RECEIPTS IN THE PERIOD** 0 ← 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)**

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

\* 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
Jan 31, 2022	Citizens Bank	PO Box 7000 Providence, RI 02940	Bank Charges	3
May 31, 2022	Citizens Bank	PO Box 7000 Providence, RI 02940	Bank Charges	10
Jun 30, 2022	Citizens Bank	PO Box 7000 Providence, RI 02940	Bank Charges	5
Jul 29, 2022	Citizens Bank	PO Box 7000 Providence, RI 02940	Bank Charges	5
Aug 31, 2022	Citizens Bank	PO Box 7000 Providence, RI 02940	Bank Charges	5
Sep 30, 2022	Citizens Bank	PO Box 7000 Providence, RI 02940	Bank Charges	5
Oct 31, 2022	Citizens Bank	PO Box 7000 Providence, RI 02940	Bank Charges	5
Enter on page 1, line 4 →	Line 12: Total Expenditures over \$50 (or listed above)			38
	Line 13: Total Expenditures \$50 and under* (not listed above)			0
	<b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>			<b>38</b>

\* 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)**

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 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	Value
Line 15: In-Kind Contributions over \$50 (or listed above)				0
Line 16: In-Kind Contributions \$50 & under (not listed above)				0
Enter on page 1, line 6 → <b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>				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.*

Enter on page 1, line 7 →

**Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)**

0



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JAN 03 2023

**Town Clerk's Office  
Maynard, MA 01754**

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8th day preceding preliminary/primary  8th day preceding election  30th day following election (town or special)  20th day of January (Year-End report)

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3. I certify that I do not have a political committee.



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report

## Municipal Form

Office of Campaign and Political Finance

RECEIVED  
JAN 20 2023

TOWN OF MAYNARD

File with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/22 Ending Date: 12/31/22

Type of Report: (Check one)

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

Jeffrey Swanberg

Candidate Full Name (if applicable)

Select Board, Maynard

Office Sought and District

96 Acton St Maynard MA

Residential Address

E-mail: swanbergjr@gmail.com

Phone # (optional):

Select Swanberg Committee

Committee Name

Jenna Dargie

Name of Committee Treasurer

33 Crane Ave Maynard MA

Committee Mailing Address

E-mail: jenna.dargie@gmail.com

Phone # (optional): (603)493-3697

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

731.00

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

731.00

Line 4: Total expenditures this period (page 5, line 14)

45.00

Line 5: Ending Balance (line 3 minus line 4)

686.00

686.00

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used: Citizens 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, 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:

(Treasurer's signature)

Date: 1/12/23

#### 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Candidate's signature)

Date: 1/20/23

**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.)**

**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

\* 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)**

**Line 9: Total Receipts over \$50 (or listed above)**

*✓*

**Line 10: Total Receipts \$50 and under\* (not listed above)**

450

**Line 11: TOTAL RECEIPTS IN THE PERIOD**

*[Signature]*

← 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
Enter on page 1, line 4 →		Line 12: Total Expenditures over \$50 (or listed above)		
Line 14: TOTAL EXPENDITURES IN THE PERIOD		Line 13: Total Expenditures \$50 and under* (not listed above)		45
* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.				45

**SCHEDULE B: EXPENDITURES (continued)**

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 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.

Enter on page 1, line 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.

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)**

6



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of Massachusetts

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Office of Campaign and Political Finance

City or Town of: MAYNARD

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RECEIVED MAR 01 2023

**TOWN OF MAYNARD  
TOWN CLERK'S OFFICE**

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