



Commonwealth
of Massachusetts

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

RECEIVED

11:27 AM
JPA

City or Town of: MAYNARD

TOWN CLERK'S OFFICE
Please print or type all information, except signatures.
Maynard, MA 01754

Reporting Period: Beginning: 01/01/2024
(MM/DD/YYYY)

Ending: 04/25/2024
(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

RECEIVED

By Town Clerk at 7:26 am, Apr 22, 2024

Please print or type all information, except signatures.

City or Town of: MAYNARD

Reporting Period: Beginning: 01/01/2024 (MM/DD/YYYY) Ending: 04/25/2024 (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: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED

APR 25 2024

Town Clerk's Office

File with: City of Maynard, MA 01754

Fill in Reporting Period dates:

Beginning Date:

1/1/2024

Ending Date:

4/25/24

Type of Report: (Check one)

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

Michael P. Stevens

Candidate Full Name (if applicable)

Select Board Member - Mayor

Office Sought and District

4 Bent Ave, Maynard, MA 01754

Residential Address

E-mail:

mstevens@townofmaynard.net

Phone # (optional):

or mikesstevens404@gmail.com

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

-297.11

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

0.00

Line 3: Subtotal (line 1 plus line 2)

-297.11

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

0.00

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

-297.11

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

0.00

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

0.00

Line 8: Name of bank(s) used:

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:

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: 4/25/2024

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)

0.00

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

0.00

Line 11: TOTAL RECEIPTS IN THE PERIOD

0.00

← 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

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

0.00

← 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.

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.)

Line 12: Total Expenditures over \$50 (or listed above)

0.00

Line 13: Total Expenditures \$50 and under* (not listed above)

0,0,0

Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD**

0. 0. 0.

* 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 _____

SCHEDULE B: EXPENDITURES (continued)

Line 12: Expenditures over \$50 (or listed above)

0.00

Line 13: Expenditures \$50 and under* (not listed above)

0.00

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD

0.50

* 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
Enter on page 1, line 6 →				Line 15: In-Kind Contributions over \$50 (or listed above) 0.00
Enter on page 1, line 6 →				Line 16: In-Kind Contributions \$50 & under (not listed above) 0.00
Enter on page 1, line 6 →				Line 17: TOTAL IN-KIND CONTRIBUTIONS 0.00

* 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.

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)

0.00



Commonwealth
of Massachusetts

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

City or Town of:

Maynard

Please print or type all information, except signatures.

Reporting Period: Beginning: _____
(MM/DD/YYYY)

Ending: 04/25/2024 (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.



Form CPF M 102: Campaign Finance Report

Municipal Form

Commonwealth
of Massachusetts

Office of Campaign and Political Finance

RECEIVED

APR 23 2024 10:04

AM

Town Clerk's Office
Maynard, MA 01754

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date: 1/1/24

Ending Date: 4/19/24

Type of Report: (Check one)

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

Lindsay McConchie

Candidate Full Name (if applicable)

Select Board Maynard, MA

Office Sought and District

52 Summer Street

Residential Address

E-mail: Lindsayhm@gmail.com

Phone # (optional):

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

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

0

Line 3: Subtotal (line 1 plus line 2)

0

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

0

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

0

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: **N/A**

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:

Nathan A. Robert

(Treasurer's signature)

Date: **4/23/2024**

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:

Lindsay McConchie

(Candidate's signature)

Date: **4/23/2024**

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)

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.)

Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD**

289.53

* 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)

* 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)				
Line 16: In-Kind Contributions \$50 & under (not listed above)				
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.

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)



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Politi

RECEIVED

By Town Clerk at 7:44 am, Apr 29, 2024

File with City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date: Jan 1, 2024

Ending Date: Apr 20, 2024

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, MA01754

Residential Address

E-mail: hilarygriffiths@gmail.com

Phone #

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 #: 781-405-0208

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

423.36

Line 2: Total receipts this period (page 3, line 12)

0

Line 3: Subtotal (line 1 plus line 2)

423.36

Line 4: Total expenditures this period (page 5, line 15)

0

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

423.36

Line 6: Total in-kind contributions this period (page 6, line 18)

0

Line 7: Total (all) outstanding liabilities (page 7, line 19)

0

Line 8: Total out-of-pocket expenses this period (page 8, line 22)

0

Line 9: 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: 4/20/24

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: 4/27/2024

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule F: Liabilities.

Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Enter receipt totals on Page 3

SCHEDULE A: RECEIPTS (continued)

Line 10: Total Receipts over \$50 (or listed above)

0

* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.

Line 11: Total Receipts \$50 and under (not listed above)

0

Line 12: TOTAL RECEIPTS IN THE PERIOD

0

← Enter on page 1, line 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. *Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.*

Enter expenditure totals on Page 5

SCHEDULE B: EXPENDITURES (continued)

* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.

Enter on page 1, line 4 →

Line 13: Expenditures over \$50 (or listed above)

0

Line 14: Expenditures \$50 and under (not listed above)

0

Line 15: TOTAL EXPENDITURES IN THE PERIOD

0

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

M.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization; however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. *Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.*

** If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.*

Enter on page 1, line 6 →

Line 16: In-Kind Contributions over \$50 (or listed above)

0

Line 17: In-Kind Contributions \$50 and under (not listed above)

0

Line 18: TOTAL IN-KIND CONTRIBUTIONS IN THE PERIOD

0

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report M.I. liabilities which have been reported previously and the outstanding balance, as well as those liabilities incurred during this reporting period.

Enter on page 1, line 7 →

Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)

0

SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. *Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.*

** If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.*

← Enter on page 1, line 8