



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:

3-18-19

Ending Date:

5-6-19

Type of Report: (Check one)

☐ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

LESLIE D. MATTHEWS

Candidate Full Name (if applicable)

PLANNING BOARD NEWBURY MA

Office Sought and District

111 MAIN ST BYFIELD MA

Residential Address

Telephone Number (optional):

COMMITTEE TO ELECT LESLIE MATTHEWS

Committee Name

ANTHONY J. MATTHEWS JR.

Name of Committee Treasurer

P.O. 662 BYFIELD MA 01922

111 MAIN ST. Committee Mailing Address

Telephone Number (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

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)

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

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

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

Line 8: Name of bank(s) used: INSTITUTION FOR SAVINGS NEWBURYPORT

### 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:

*Anthony J. Matthews Jr.*

(Treasurer's signature)

Date:

5-5-19

### 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.

*Leslie D. Matthews*

## 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)
4-17-19	F. DAVIS MAIN ST NBY BYFIELD	200	F.W.DAVIS JANITORIAL CLEANING
4-29-19	B. CONNORS BLANNAPOLIS NBY P.I.	200	R.D. CONNORS CORP.
3-18-19	J & N MORAN ELM ST BYFIELD	100	
3-18-19	E. NOYES DOWNFALL RD BYFIELD	100	
3-18-19	J. STOREY NBY	100	
3-18-19	B WENDT MAIN ST NBY BYFIELD	70	
Line 9: Total Receipts over \$50 (or listed above)		\$770	
Line 10: Total Receipts \$50 and under* (not listed above)		\$360-	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1130	← Enter on page 1, line 2

## 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
3-30-19	BYFIELD P.O.	CENTRAL ST BYFIELD	STAMPS	55
5-1-19	BYFIELD P.O.	CENTRAL ST BYFIELD	STAMPS	110
4-2-19	MATTHEWS, ALCIA	17 BRIGGS AVE NEWBURYPORT	SIGNAGE, POST- CARDS(VISTAPRINT)	80.94
4-20-19	MATTHEWS, ALCIA	17 BRIGGS AVE NEWBURYPORT	SIGNAGE, POSTCARDS (VISTAPRINT)	100.00
4-30-19	L.D MATTHEWS	111 MAIN ST BYFIELD	FOOD FOR FUNDRAISER	80.73
4-5-19	SEAPORT SIGNWORKS	6 NEW PASTURE RD NEWBURYPORT	YARD SIGNS	422.88
Line 12: Total Expenditures over \$50 (or listed above)				849.55
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Line 14: TOTAL EXPENDITURES IN THE PERIOD				849.55

Enter on page 1, line 4 →

## 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
5-2-19	ALANNA CASEY	ELM ST BYFIELD	100 STAMPS	55
4-5-19	ALYCIA MATTHEWS	17 BRIGGS AVE NEWBURYPORT	3 SIGNS FROM VISTA PRINT	54.06
4-15-19	A.J. MATTHEWS JR	111 MAIN	SIGN MAKING MATERIALS	64.22
			Line 15: In-Kind Contributions over \$50 (or listed above)	173.28
			Line 16: In-Kind Contributions \$50 & under (not listed above)	23.46
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	196.74

\* 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



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

19 JUN 10 AM 9:59  
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 5-17-19 Ending Date: 6-10-19

Type of Report: (Check one)

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

LESLIE D. MATTHEWS  
Candidate Full Name (if applicable)  
PLANNING BOARD NEWBURY, MA.  
Office Sought and District  
111 MAIN ST. BYFIELD, MA  
Residential Address  
E-mail: \_\_\_\_\_  
Phone # (optional): \_\_\_\_\_

COMMITTEE TO ELECT LESLIE MATTHEWS  
Committee Name  
ANTHONY J. MATTHEWS JR.  
Name of Committee Treasurer  
P.O. BOX 662 BYFIELD MA 01922  
Committee Mailing Address  
E-mail: \_\_\_\_\_  
Phone # (optional): \_\_\_\_\_

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>280.45</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>280.45</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>55.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>225.45</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>INSTITUTION FOR SAVINGS NBPT</u>

### 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: Anthony J. Matthews Jr. (Treasurer's signature) Date: 6-10-19

### 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.

## 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.)

[illegible]

**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

## 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
5-7	BYPFIELD P.O.	CENTRAL ST BYPFIELD	STAMPS	\$ 55
			Line 12: Total Expenditures over \$50 (or listed above)	\$ 55
			Line 13: Total Expenditures \$50 and under* (not listed above)	
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	\$ 55

## 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.

[illegible]

\* 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

## 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.*

[illegible]

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 Political Finance

RECEIVED  
19 JUN 11 AM 10:07

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

5/2/2019

Ending Date:

6/1/2019

Type of Report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☒ 30 day after election

☐ year-end report

☐ dissolution

Michael Doyle

Candidate Full Name (if applicable)

Newbury Selectman

Office Sought and District

6 Morgan Ave - Newbury, Ma 01951

Residential Address

Telephone Number (optional):

978 873 5010

Committee to Elect

Michael Doyle Selectman -

Name of Committee Treasurer

Leslie Doyle 6 Morgan Ave  
Newbury, Ma 01951

Committee Mailing Address

Telephone Number (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

\$ 66.00

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

\$ 300.00

Line 3: Subtotal (line 1 plus line 2)

\$ 366.00

Line 4: Total expenditures this period (page 3, line 14)

\$ 300.00

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

\$ 66.00

Line 6: Total in-kind contributions this period (page 4)

0

Line 7: Total (all) outstanding liabilities (page 4)

0

Line 8: Name of bank(s) used:

Institution for Savings

### 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:

[Signature]

(Treasurer's signature)

Date: 6/1/19

### 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.

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

Signed under the penalties of perjury:

Michael Doyle

(Candidate's signature)

Date: 6/1/19

## 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.)**

[illegible]

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

4300-

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

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

\$300-

← 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
5/17/18	Michael Doyle	6 Tabor Ave Newbury, Ma	Payback loan to Campaign	\$300. <sup>00</sup>
			Line 12: Total Expenditures over \$50 (or listed above)	\$300-
			Line 13: Total Expenditures \$50 and under* (not listed above)	-
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	\$300-

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



# 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: 3-15-2019 Ending Date: 5-1-2019

Type of Report: (Check one)

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

Michael Doyle  
Candidate Full Name (if applicable)

Newbury Selectman  
Office Sought and District

6 Morgan Ave Newbury MA 01951  
Residential Address

Telephone Number (optional): 978-873-3010

Committee to Elect Michael Doyle Selectman  
Committee Name

Leslie Doyle  
Name of Committee Treasurer

6 Morgan Ave Newbury MA 01951  
Committee Mailing Address

Telephone Number (optional): \_\_\_\_\_

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>- 0 -</u>
Line 2: Total receipts this period (page 2, line 11)	<u>2980.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>2980.00</u>
Line 4: Total expenditures this period (page 3, line 14)	<u>2914.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>66.00</u>
Line 6: Total in-kind contributions this period (page 4)	_____
Line 7: Total (all) outstanding liabilities (page 4)	_____
Line 8: Name of bank(s) used:	<u>Institution for Savings</u>

### 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: [Signature] (Treasurer's signature)

Date: 5/1/19

### 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.

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

Signed under the penalties of perjury: Michael Doyle (Candidate's signature)

Date: 5-1-2019

## 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)
4-1-19	Keith Ribbow 16 Green Street Newbury MA 01551	\$150.	
4-18-19	Linda Allen 103 Central St Byfield MA 01922	\$100	
3-20-19	Seymour Chinnouch 38 Moody St Byfield MA 01922	100	
4-9-19	Bob Connors 39 Ann Arbor Way Plum Island Newbury	200	R.D. Connors Corp 400 West Cummings Park Woburn MA 01801
4-15-19	Fred Davis PO Box 507 Byfield MA 01922	200	
4-15-19	Jean Doyle 20 Rolfe's Lane Newbury MA	200	Retired Teacher
4-15-19	Michael Doyle 6 Morgan Ave Newbury MA	500	Candidate Loan to Campaign
4-15-19	Peter Farnell 4 Morgan Ave Newbury MA	100	
3-19-19	Stephen Farnam 21 Fenner St Byfield MA	100	
4-6-19	Stephen Gnauxille 1 Washington St Newbury MA	100	
4-15-19	Purinton Family Trust 36 Main St Byfield MA	200	
4-16-19	Linda Paulhus 26 Lincoln St Newburyport MA	100	

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

2600.

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

380

Line 11: TOTAL RECEIPTS IN THE PERIOD

2980

← 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
3-28-19	Seaport Sign Works	18 Graft Rd Newburyport MA	Printing	1,000-
3-16-19	Staples	Lafayette Rd Seabrook NH	Printing	99.17
4-11-19	Seaport Sign Works	See Above	Printing	500-
4-11-19	Amazon	on Line	Labels	70-
4/11/19	US Post. office	Byfield	Postage	220
4/15/19	Newburyport Bank	High Rd Newbury 01951	Postage	165
4-16-19	Newburyport Bank	See Above	Postage	220
4-29-19	Seaport Sign Works	See Above	BANNERS	210
4-30-19	US Post office	Byfield See Above	Postage	220
4-30-19	Seaport Sign Works	Above	Post Cards	210
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				0-
Enter on page 1, line 4 → <b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				<b>2914</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 A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4-1-19	Richard Roxington 36 MAW St Byfield 01922	100	
4-11-19	William Pearson 11 Coonson Brook Drive Byfield 01922	250	Pearson Companies 2 Fruit St Byfield MA
3-19-19	JAMES MONAHAN 104 Elm St Byfield	200	Retired
Line 9: Total Receipts over \$50 (or listed above)			← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

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