

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth

Candidate signature (in ink)

File with:

or Town Clerk or Election Commission Please print or type all i	nformation, except signa	tures.
Fill in dates: Reporting Period Beginning イクトラ よる	Year	Month Date Year
Type of report: (Check one) 38th day preceding preliminary 28th day preceding elec	tion \(\sigma \) day after ele	ction □year-end repart □dissolu
Matthew J. M. Donough Full Name of Candidate (if applicable) Selectman, Marshfield Office Sought and District 335 Careswell St. Residential Address Marshfield, MAD2050 781-834-4185 Tel. No. (optional)	Sarale And Name of Sas Car	Ict Matt McDonorgy Smmittee Name Sante av Committee Treasurer Swell Str tee Mailing Address MA-02057 Tel. No. (optional)
SUMMARY BALA Line 1: Ending balance from pre Line 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this p Line 5: Ending balance (line 3 minus	vious report (page 2, line 11) eriod (page 3, line 14)	\$ 9,195,85 \$ 1025,00 \$ 10220.85
Line 6: Total in-kind contributions Line 7: Total (all) outstanding liabil Line 8: Name of bank(s) used	this period (page 4) lities (page 4) Hizens Bank	S
Midavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, nance activity, including all contributions, loans, receipts, expenditures, disburumpaign finance activity of all persons acting under the authority or on behalf of Signed under the personance of the perso	sements, in-kind contributions a of this committee in accordance	nd liabilities for this reporting period and concer-
FOR CANDIDATE FILINGS	ONLY: (CANDIDATE M	UST SIGN BELOW)
Midavit of Candidate: (check I box only) Candidate with Committee and no activity independent of the committee certify that I have examined this report including attached schedules and it is, nance activity, of all persons acting under the authority or on behalf of this contributions, incurred any liabilities nor made any expenditures on my behalf discontinuous, incurred any liabilities nor made any expenditures on my behalf discontinuous with independent activity.	to the best of my knowledge and mmittee in accordance with the uring this reporting period.	I belief a true and complete statement of all care

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:

Committee to Elect Mass McDonaugh p. 2 A

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

number on e Date Received	Name and Residential Address	Amount		Occupation & Employer (for contributions of \$200 or more)
3/28/10		50		
1 /10	Cantwell, John J., 8 Molden St., Marsh field, MA 02050	25		
4/11/10	Carry M/m Wender, 499 Union St., Marshfield, Mrs. 02050	50		
7/10	Carvana, Elizabeth, 26 Fair Stylmit 9 Newhorn, port, MA 01950	Źoo		St. Professional Sales Rey. Astellas Pharmaceuticals
7/28/10	Casoni, Elizabeth, 96 Meetinghouse lea Marshfield, MA 02050	25		
4/5/10	Cassidy Michael, as Woodside RI. Winchesten MA 01890	100	-	
2/8/10	Cavanangh, thomas, 15 Foster St., Quincy, MA 02169	50		
722/10	Cedrone Jenne for 196 Winslow Cemetery Rd Marsh frelo, MA 02050	25		
1/28/10	Cerreto, M/m Kennesh, 73 Bolton Woodshily Bolton, MA 01740	15		
۱ ۳۰	Christenson, M/m Jack 110 Union Gr Marsh field, MA 02050	25		
3/10/10	Cisternelli, M/m Edward, 298 almst Walpole, MA 02081	57		
4/1/10	Cohoon, timothy, 195 Ferry &. Marshfield, MA 02,50	150		
17/0	Connoily, My Midded, 43 Smith's Lane Kinnstran mut 02364	50		
7/28/10	Connolly, M/M Bryan, 3 Woodcliff Rd Quincy, MA 02169	(ov		
2/25/10	Connolly, M/M Patrick 4 Dunns Hill D Quincy, MA 02169	50		
Line 9: T	otal receipts in excess of \$50 (or listed above)			
Line 10: T	otal receipts \$50 and under* (not listed above)			
Line 11: T	OTAL 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.

Page 2

Committee to Elect Mat MiDonough - y. 2B

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

number on e Date Received	. Name and Residential Address	Amount		Occupation & Employer (for contributions of \$200 or more
2/25/10		50		
2/23/10	Cook, M/M Ken, 5 Waterview Laxe, Kingston, MA 02364	24		
72/10	Look ne/m thomas 109 Hudson St, Apt 1 Somerville MA 02144	100		
2/2/28/4	Currie, M/m Mother 389 Furnace St Marsh Field, MA 02058	50		
2/18/10	Litler, Josh 22 Vine St.,	50		
728/D	Dexter, 77mm, 201 Arlington Sty Marshfield, MA 02050	25		
2/28/10	Dexter natheriel 201 Artington & marsh field, MA 0200	25		
3/5/10	Donnolly, MM Shawn, 41 North St. 1 Middlehoro, MA 02346	200		acct director, Access TCA, Inc.
H28/10	Donover, Army M., 1232 Washington's Brain Lice MA 02184	25		
1/25/10	Dougenik, Anthony, 18 clover Lane, Scituate, MAT 02066	25		
2/28/10	Mursh field, met 02050	25		
3/1/10	Fenochetti, Norma, 88 Winslowst lo Box 44, Norsh field, Met 02050	50		
3/4/10	Fieldsend, M/M John 16178 Goodin Close Columbia MD	58		
2/n/10	Finnerau, M/m Larry 43 Bailey Rd. Hunover, MA 02339 Flaherty Timothy, 101/semonts, Soute 615	25		
3/2/10	Flaherty Timothy, 101 Teement & Soute 618 Boston, MA 02108	100		
Line 9:	Total receipts in excess of \$50 (or listed above)			
	Total receipts \$50 and under* (not listed above)			
Line 11:	FOTAL 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 Page 2 above.

Committee to elect must the Donough p.2C

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

number on e				
Date Received	Name and Residential Address (alphabetical listing required) Garagiola, MM Issoph, 1235 E familie Dr. Scottsdale, Az 85260 Germ, Jason 3 Webster S garre, Sche 318	Amount		Occupation & Employer (for contributions of \$200 or more
3/1/10		los		
3/11/10	Gerry, Jason 3 Wenster Spaine, Side 318 Marshfield, MA 02050	50		
	Goodsell, M/m David 197 Canal St, Popor 17 Green Harbor, MA 02401-0732	100		
4/10/10	Gould, Mrs. Crystel PO Box 254 No. Marsh feeld, MA 02059	150		
3/24/0	Griffin, Mrs. Elizabeth lo Box 2637 Ocean bluff, MA 02065	250		gelf-employed
4/4/10	Hargadon, Gregory, 72 Veronica Lane E. Weymouth MA 02189	760		U J
3/8/10	Harnals, Robert 15 Foster St. Quincy, MA 02169	50		
4/5/10	Harrington, James, 42 thorny lea ferma Brickton, MA 02301	foo		
2/28/0	Healy, m/m John 112 Walnut St. Deshem MA 02026	lod		
3/4/10	Hely, Carolin 33 Hemmond fond forg, April, Chestrut Hill, MA 02467	25		
3/8/10	nifm michaeltickey, 5 Milksty Natick, MA 01760	25		
3/8/10	Hynes M/m Frank, 18 Methighnocky Murshfield not 02050	26		
3/6/10	1 BEW Local 2227, 1157 Washington's, Suite3, Dorchester MY 02124	250		Labor Union
3/10/10	IBEW Local 223, POBOY 1238, 111 Rhode Island NO. Lakeville WA 02347	jod		
2/24/10	Johnston, Phollip W., 134 Tilden Rd., PoBox 909, Marshfield, MA 02050	15		
Line 9: T	otal receipts in excess of \$50 (or listed above)			
Line 10: T	otal receipts \$50 and under* (not listed above)			
Line 11: T	OTAL RECEIPTS IN THE PERIOD			Enter on page 1, line 2

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Page 2

Committee to Elect Met McDonough - p2D

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Received	Kesting, M/m Wm., 111 Bay Road Sharon, MA 02067	Amoun	t Occupation & Employer (for contributions of \$200 or more)
7/28/10		57	
7/18/12	Keenan, m/M Richard 22 Wey for feth, S. Wey mouth, MA 02190	àś	
3/1/10	King, My M Wayne, 165 Winstow Cenedery A. Marsh Field. Mr. 02050	25	
3/8/10	Kowalski, Min Car Jao Mellen Sk#1 Downester NA 02124	100	
2/28/10	Rusinia, n/methen, 120 Sunmer St.	50	
414/10	Lee MM James (48 Pleasant Wood) Honover, MA 02339	100	
3/1/10	Lee M/M Homes, 68 Nams Sty Holbrook, MA 02343	50	
401	Lewis normal So Windermere way	100	
3/8/10	Britagewater MA 02324 Lingberg, Man Many, 31 Columbus Roj Mushfield, MA 02050	25	
428/10	MacDoxeld, Grome Tré Bubura, 47 Primrose La., Marshfrell, MAOZVIO	15	
1/28/10	Machean, What Aling 36 Pocoder House Bly. #1. Somerville, MA 02143	100	
729/10	Miresco, Michael, 201 Artingtursti Mirghfield, MA 02050	50	
2/28/18	Murtyn, Rajeeve, 76 W. Cedorse, Apr.G. boston MA 02114	1 50	
3/5/10	Marshfield, MA 02050	26	
3/12/10 -	Mattar, M/m. Cherle, 2 Fresh frinkly Myshfield, MA 02050	125	
Line 9: T	otal receipts in excess of \$50 (or listed above)		
	otal receipts \$50 and under* (not listed above)		
Line 11: T	OTAL RECEIPTS IN THE PERIOD		Enter on page 1, line 2

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Page 2

Commistee to Elect mett McDonough p ZE

SCHEDULE A: RECEIPTS

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This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Received	Name and Residential Address (alphabetical listing required) No Avila Ovislopho 1245 Hancock St., Sute 4, Quincy, MA 82169	Amount		Occupation & Employer (for contributions of \$200 or more
3/5/10		100	-	
3/1	McGlynn, Mr. Patty San 91 Rockwood Dr.	50	/	
2/28/2	Horhum fark, no 01932 Me Meckin, David 16 Forest Rd. Holbrook, MA 02343	35		
1/22/10	McQuade, Mrs. Merilya, 349 Careswells. Warshfield MA 02050	51		
428/10	Mohan Jason 253 Turnpike Sty Easton, MA 02375	100		
110	Morgen Sherong Richard, 22 Squarto Rd, No. Weymorth, MA 02 191	57		
1-1/0	Morrison, Marti 1030 Sc River Str Marshfield, MA 02050	25		
3/3/10	Murphy, Todo M. 2316 W. Ohio St. Chicago, IL 60612 Murry Mym John, 14 Survey Dr.	50		
,,,,	LOCKARCINE IL330	25		
	nicholson Craig, 2 Rollins St, Apt. D601 Boston, MA 02118-4412	B		
3/31/10	Nicholson, Keith 50 Parrist-arm Rd E. Bridgowater, MA 02333	as		
3/8/10	Noone Patrick, 33 Trayer Rd. Canton, MA 02021	50		
2/19/10	O'Donnell, James, 58 Carolina Trail, Marshfield, MA 02050	21		
7/14/10	Marshfield, MA 02050 O, Donnell, Michael, 24 Bows. Carver, MA 02330	26		
2/28/10	O'Keefer Steven 829 Boylston St, Apr. 1, Boston, Mr 02116	15		
	otal receipts in excess of \$50 (or listed above)			
	otal receipts \$50 and under* (not listed above)			
Line 11: T	OTAL 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. Page 2

Committee to Elect Met Me Donough p. 2G

SCHEDULE A: RECEIPTS

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This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Received	Name and Residential Address (alphabetical listing required) Byan, MM William: 33 Orchardione, Majoraton, MA 02351	Amount	Occupation & Employer (for contributions of \$200 or more
/ 10		100	
2/19/10	Sharkey, Brender 46 Emery Rs., Markfield, gar 02050	25	
2/25/10	Spillane Kerri 25 Calypso Lane 1 Marshfield, Mr 02057	50	
	Stone, 14m Christopler 2 Longwater Dr. Honover, MA 02339	25	
2/28/10	Sullivan, Paul P., 740 VFW Parkerry, West Rox bury, MA 02132	25	
//0	Sullivan, Susan M., 431 School St., Pembroke MA 02359	50	
123/10	Marantino, Frank, 100 AtwellCircles Myrshfield, MA 02050	125	
7/28/0	Tramonte Louviel Oreste 119 Flagler Dr., Box 43 Mershfield MA 02000	100	
3/13/	litility Workers Union, PAC 80627, 120 Bay	250	labor unior
14/10	Vallier, M/m John, 15 Revere 8.1 Marshfield, MA 02050	B	
- / ₂ 0	Violo, Alm Snedony, 81 Hamesway, Marshfield, MA 02050	50	
1/29/2	Welch, Jeffrey, Po Box 2384 Abington, MA 02357	50	
12/10	Times here Elizabet & Mechaginese Lang Marshfield, MA 02050	100	
2/11/10	Zinner han Elizabet a Mechagines Lang Marshfield, MA 02051) Barry, Brian C. 30 Pinckney St. Apr. 1, Boston, MA 02 114	200	Choate, Hall, Stewart, LLP attorney
Line 9: 7	Total receipts in excess of \$50 (or listed above)		
	Fotal receipts \$50 and under* (not listed above)		
Line 11: 7	TOTAL RECEIPTS IN THE PERIOD		Enter on page 1, line 2

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Page 2

Committee to Elect Matt McDonough p. 2th These recepts came after the previous report, but before the alphabetical list on SCHEDULE A: RECEIPTS p2, 2A thru 20.

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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Received	John Dunleavy, 20 Portomor, Apt-	Amount		Occupation & Employer (for contributions of \$200 or more)
1/1/18		5m		retired
1/21/10	P. Vincent Dunleavy, 527 Riveriale Ave., Yonkers, NY 10708	500		rctived
11 , 1	Kathleen H. J. Liebfried 120 E 8748; Apt. 1 O-W, NY, NY 10128 Joseph F. McDonough, 11 Ermine St.,	500		managing director-operational rich management Citigroup
110	Scituate, MA 0606	500		self-employed afterney
2/19/10	Sheet Metal Workers, Local Union#17 1161 Adams St., Boston MA 02124	50		labor union
Line 9:	Total receipts in excess of \$50 (or listed above)	10,553	00	
	Total receipts \$50 and under* (not listed above)	77-50	-	
	TOTAL RECEIPTS IN THE PERIOD	10 562	00)	Enter on page 1, line 2

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Page 2