

Form CPF M 102: Campaign Finance Report

Municipal Form

RECEIVED TOWN CLERK MAY 13'22 AM9:18

Office of Campaign and Political Finance

E:::: D	D D .				or Town Clerl	k or Election Commissio
Fill in Reporting Period dates	s: Beginning Date: 3/	/29/2022	Ending 1	Date: 5/9/	/2022	
Type of Report: (Check one)					****	****
8th day preceding preliminary	★ 8th day preceding election	ı 🔲 30 day	y after election	year-er	ıd report	dissolution
Michael Regan Candidate Full Na	ame (if applicable)					
Medway Redevelopment Authority	· •• •			Committee N	lame	
	nt and District		Na	me of Committe	e Treasurer	
10 Lovering Street Medway, MA 02						
	al Address	To mail.	C	ommittee Mailin	g Address	
Phone # (optional):	374@gmail.com	E-mail:				
rione " (optional).	774-291-0908	Phone # ((optional):			
	SUMMARY BALAN	NCE INFO	RMATION:			
Line 1: Ending B	Balance from previous report				0.0	00
Line 2: Total rec	eipts this period (page 3, line	11)			0.0	00
Line 3: Subtotal	(line 1 plus line 2)				0.0	00
Line 4: Total exp	penditures this period (page 5,	line 14)			214.0	
Line 5: Ending B	Balance (line 3 minus line 4)					
Line 6: Total in-l	kind contributions this period ((page 6)			0.0	=
Line 7: Total (all) outstanding liabilities (page	7)			0.0	
Line 8: Name of	bank(s) used:		VIIII ELLI			
Affidavit of Committee Treasurer: I certify that I have examined this report inch activity, including all contributions, loans, refinance activity of all persons acting under the Signed under the penalties of perjury:	ceipts, expenditures, disbursements, in-ki	ind contributions :	and liabilities for this	s reporting period of M.G.L. c. 55.	l and represen	II campaign finance nts the campaign
FOR CANDIDATE FILINGS ON	ILY: Affidavit of Candidate: (check 1	t box only)			<u> </u>	
activity, of all persons acting under the a	t including attached schedules and it is, to authority or on behalf of this committee in penditures on my behalf during this report	n accordance with	the requirements of	M.G.L. c. 55. 11	have not recei	of all campaign finance ived any contributions,
finance activity, including contributions,	t including attached schedules and it is, to, loans, receipts, expenditures, disburseme acting under the authority or on behalf of	ents, in-kind cont	ributions and liabiliti	ies for this report	ing period and M.G.L. c. 55.	d represents the
Signed under the penalties of perjury:	Makel H	Three-	(Candidate's	s signature)	Date: 🛫	5/9/7002

(Candidate's signature)

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.)

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)

[] 			
100			
ne 9: Total Receir	ots over \$50 (or listed above)		
	(3. 1.2.1.2.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.		
ne 10: Total Recei	pts \$50 and under* (not listed above)		
ne 11: TOTAL R	ECEIPTS 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
// · · · · · · · · · · · · · · · · · ·			Turpos of Expenditure	
1/24/2022	Vista print	170 Data Dr. Waltham, MA 02451 to	Campaign flyer/Post cards	39.0
-/6/2022	Signs 365	51245 Filomena, Shelby Township, MI 48315	Campaign yard signs	175.0
				100 T
		Line 12: Total Expenditures	over \$50 (or listed above)	175.00
		Line 13: Total Expenditures \$	650 and under* (not listed above)	39.07
	Enter on page 1. line 4 →	Line 14: TOTAL EXPEND	TURES IN THE PERIOD	214.07

^{*} 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 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
00-00-00-00-00-00-00-00-00-00-00-00-00-				
				-
Line 15: In-Kind Contributions over \$50 (or listed above)		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			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.

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.

Date Incurred	To Whom Due	Address	Purpose	Amount
]	
				-
			- April Apri	
			The state of the s	
				1
	1			1000000

ORDER DETAILS 013498000010

Gemini Signs	Line Totals	\$165.00
Order #: 013498000010	Shipping	\$10.00
Date: April 6, 2022 Time: 10:28 AM	Total Cost	\$175.00
	Payment Visa 1884	\$175.00
	Balance Owed:	\$0.00

SHIPPING DETAILS

Shipping Method: Next Day Priority Shipping To: Gemini Signs & Letters

128 S Bolton St

Marlborough, MA 01752-2889

US



Order Date April 6, 2022

> * Elect * MICHAEL

REGAN REDEVELOPEMENT **★** AUTHORITY ★

24"x18" (30)

* Elect * MICHAEL REGAN

REDEVELOPEMENT * AUTHORITY *

24"x18" (30)

Est. Ship Date April 7, 2022

Coro 4mil Double Sided - Rigid

Qty: 3

Image Quantity: 30 Size: 24" x 18" Price: \$165.00

Est. Delivery Date April 8, 2022

THANK YOU FOR YOUR ORDER!

See Why Over 40,000 Trade Professionals Choose Us!

ALUMINUM POLYSTYRENE CORO. PHOTOHO HOPE FOAMCORE CHIEFPRINTS MESH BANNERSTAND POSTER POLYAIR JBOO PAPER WALL PLE DRYFRASE CANVAS FABRIC REFLECTIVE SMCONTROLTAC MOGNET MHDBANNER



Fwd: Your VistaPrint order is confirmed

Amanda Regan <aregan777@gmail.com>
To: Michael Regan <mregan1374@gmail.com>

Sun, Apr 24, 11:36 AM

----- Forwarded message -----From: **VistaPrint** <no-reply@t.vistaprint.com>

Date: Sun, Apr 24, 2022 at 11:36 AM Subject: Your VistaPrint order is confirmed To: Amanda Regan <a regan 777@gmail.com>

Order Confirmation



Order number: VP_V0GLTJ1L



Thank you for your order.

ार्थका इस्सागड

Expected delivery: May 5 **Shipping option:** Standard

Order date: Apr 24

Shipping address

Michael Regan 10 Lovering St Medway, MA 02053-2004 United States

Billing address

Amanda Regan 115 Lincoln Street Framingham, MA 01702 United States

Order summary

Postcards

Expected delivery Thu May 5 Quantity: 100 \$29,28



Product subtotal: \$29.28
Shipping: \$7.49
Total tax: \$2.30
Total paid: \$39.07



Need help? Get in touch with our customer care team.

This email is automatically generated, please do not reply.

All products & services are provided by VistaPrint, a Cimpress Company 170 Data Drive, Waltham, MA, 02451.

Privacy & Cookie Policy | Terms & Conditions | Contact Us

a CIMPRESS company

[Quoted text hidden]