



Commonwealth of Massachusetts

# Municipal Form

Office of Campaign and Political Finance

RECEIVED TOWN CLERK  
BRAintree, MA

2017 JAN 20 AM 8:30

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/16 Ending Date: 12/31/16

Type of Report: (Check one)  
 8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

Christopher P. Griffin  
Candidate Full Name (if applicable)  
(None) left over from run for Council in 09  
Office Sought and District  
501 Commerce Drive #1215 Braintree, MA 02184  
Residential Address  
Telephone Number (optional):

Committee to elect Christopher P. Griffin  
Committee Name  
Robert B Griffin  
Name of Committee Treasurer  
501 Commerce Drive #1215 Braintree, MA 02184  
Committee Mailing Address  
Telephone Number (optional):

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>\$623.18</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$623.18</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$623.18</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>Braintree Cooperative Bank</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: Robert B Griffin (Treasurer's signature) Date: 1-10-17

**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.

Chris P Griffin 1/10/17









**Schedule E  
Municipal Form  
Disclosure of Assets Statement  
Office of Campaign and Political Finance**

Commonwealth  
of Massachusetts

File with: City or Town Clerk or Election Commission

CPF ID# \_\_\_\_\_

This form should be filed by all candidates and committees with each year end and each dissolution report.

Committee Name: Comm. Hep to elect Christopher P. Griffin Date of report: 1/10/17

All candidates and committees must fill in Part A or Part B.

**Part A:**

No assets\* were acquired or disposed of by this candidate/committee during the period covered by this statement.

**Part B:**

**Assets acquired:** List all assets acquired since the committee last filed this statement. If this is the first Schedule E you have filed, list all assets.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value

**Assets disposed of:** List all assets sold, traded or transferred during the reporting period covered by this statement.

Asset Include year, model or other identifying information, if applicable.	Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	Disposition Value Attach statement of how value is determined.

Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.

\*An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.

Signed under the penalties of perjury:

[Signature] 1/10/17  
Candidate signature Date

Signed under the penalties of perjury:

[Signature] 1-10-17  
Treasurer signature Date

Attach additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.

