



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: 8/30/21 Ending Date: 10/15/2021

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

Elizabeth Maglio
 Candidate Full Name (if applicable)
 Town Council District 3
 Office Sought and District
 115 Glenrose Ave., Braintree, MA 02184
 Residential Address
 E-mail: elizabethmaglio@icloud.com
 Phone # (optional): 617-842-6492

Elect Elizabeth Maglio Committee
 Committee Name
 Wendy Zarrella
 Name of Committee Treasurer
 115 Glenrose Ave., Braintree, MA 02184
 Committee Mailing Address
 E-mail: votemaglio@gmail.com
 Phone # (optional): 617-842-6492

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 11)	2835.88
Line 3: Subtotal (line 1 plus line 2)	2835.88
Line 4: Total expenditures this period (page 5, line 14)	1160.53
Line 5: Ending Balance (line 3 minus line 4)	1675.35
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:	Santander 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: Wendy Zarrella (Treasurer's signature) Date: 10/25/21

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: Elizabeth Maglio (Candidate's signature) Date: 10/25/21

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)
	Please see attached detailed spreadsheet		
Line 9: Total Receipts over \$50 (or listed above)		2835.88	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		2835.88	← 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.

Date Received	Amount	Donor First Name	Donor Last Name	Donor Address Line 1	Donor City	Donor State	Donor ZIP	Donor Occupation	Donor Employer
10/1/2021	\$ 50.00	Kathryn	Anderson	74 Glenrose Ave	Braintree	MA	2184	Not Employed	Not Employed
10/15/2021	\$ 75.00	Angela	Cavanaugh	82 Worthington Cir	Braintree	MA	2184	Architect	Raymond Design Associates
9/28/2021	\$ 100.00	Monique	Chateaufort	6 Grant Ct	Ipswich	MA	1938	Assistant	MGH
10/12/2021	\$ 50.00	Patricia	Cobb	459 Lantern Wood Dr	Scottdale	GA	30079	Paralegal	Focus Brands LLC
9/12/2021	\$ 50.00	laura	colpus	2 phillips st	braintree	MA	2184	sales	self
10/12/2021	\$ 50.00	Donna	Connors	94 Cedarcliff road	Braintree	MA	2184	Engineer	Nasr
9/3/2021	\$ 250.00	Edward	Cook	7 Longfellow Street	Boston	MA	2122	Not Employed	Not Employed
10/11/2021	\$ 100.00	Edward	Cook	7 Longfellow Street	Boston	MA	2122	Not Employed	Not Employed
9/28/2021	\$ 100.00	Wendy	Cullivan	150 Roosevelt Road	Weymouth	MA	2188	Not Employed	Not Employed
9/1/2021	\$ 25.00	Robyn	Eastwood	16 Randlett St.	Quincy	MA	2170	Asst. Dir of Development	Project Hope
10/3/2021	\$ 25.00	Crystal	Evans	15 Hall Ave	Braintree	MA	2184	Health Policy	UMass Medical School
9/30/2021	\$ 100.00	Peter	Galvin	11121 Queensland St, C17	Los Angeles	CA	90034	Social worker	UCLA health
10/8/2021	\$ 50.00	Jennifer	Grehan	62 Burnside St	Medford	MA	2155	Football player	MHS
9/18/2021	\$ 50.00	Lisa	Gurgone	48 Cowasset Lane	Waltham	MA	2451	Executive Director	Mass Home Care
8/31/2021	\$25.00	Elizabeth	Maglio	115 Glenrose Ave.	Braintree	MA	2184	Professor	Adjunct/Multiple Colleges
8/31/2021	\$35.88	Elizabeth	Maglio	115 Glenrose Ave.	Braintree	MA	2184	Professor	Adjunct/Multiple Colleges
9/22/2021	\$ 50.00	Garrett	Maglio	40 School Street	Northborough	MA	1532	Mechanical Engineer	VentriFlo, Inc
9/27/2021	\$ 50.00	Claire	McCormack	48 Newton Avenue	Braintree	MA	2184	Not employed	Not employed
10/13/2021	\$ 50.00	Jane	McGowan	93 Glenrose Avenue	Braintree	MA	2184	Business Manager	Health 1 Technologies
9/22/2021	\$ 25.00	Kathleen	MCMULLIN	16 Devon Road	Braintree	MA	2184	Admin Assistant	University of Massachusetts Boston
9/16/2021	\$ 50.00	Claudette	Newhall	25 Robinson Ave	Braintree	MA	2184	Not Employed	Not Employed
10/13/2021	\$ 100.00	Matt	O'Malley	51 Gretter Road	Boston	MA	2132	City Councilor	City of Boston
9/3/2021	\$ 500.00	John	Parsons	7 Longfellow Street	Dorchester	MA	2122	Economist	MIT
10/12/2021	\$ 50.00	Kate	Pellegrini	1 Virginia Avenue	North Attleboro	MA	2763	Product Manager	Sans
10/12/2021	\$ 50.00	Carolann	Ricardo	117 Adams St	Braintree	MA	2184	Social Work	Self Employed
9/4/2021	\$ 50.00	Laura	Schaefer	42 Merganser St Unit 16	Westbrook	ME	4092	Mental Healthn	ProtoCall Services
10/11/2021	\$ 25.00	Kathleen	Shaban	53, Newton Avenue	Braintree	MA	2184	Not Employed	Not Employed
10/6/2021	\$ 100.00	Martha	Smith-Blackman	43 Putnam Street	Weymouth	MA	2189	Veterinarian	Harvard Law School
9/12/2021	\$ 50.00	Kathleen	Tuffy	7 Prescott Lane	Braintree	MA	2184	Not Employed	Not Employed
9/16/2021	\$ 100.00	James	Tuffy	71Prescott Lane	Braintree	MA	2184	Mechanic	Deacon Transportation
10/3/2021	\$ 100.00	Dawn	Whitney	34 Wilkins Rd	Braintree	MA	02184-2018	Nurse	Northeastern University
9/23/2021	\$ 100.00	Wendy	Zarella	141 CONCORD ROAD	SUDBURY	MA	01776-2330	Controller	John A Penney Co.Inc.
10/5/2021	\$ 250.00	Christy	Zarella	240 Essex St	Lynnfield	MA	1940	teacher	Urban College Boston

\$ 2,835.88

SCHEDULE A: RECEIPTS (continued)

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

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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/22/21	GoDaddy Web Hosting	GoDaddy.com	Web site	35.88
9/22/21	New England DTG	Randolph, MA	Election Signs	450
10/12/21	New England DTG	Randolph, MA	Election Signs	490.63
10/8/21	Vista Print	VistaPrint.com	Door hanger literature	184.02
Line 12: Total Expenditures over \$50 (or listed above)				1160.53
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1160.53

Enter on page 1, line 4 →

* 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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
			Line 12: Expenditures over \$50 (or listed above)	
			Line 13: Expenditures \$50 and under* (not listed above)	
	<small>Enter on page 1, line 4 →</small>	Line 14: TOTAL EXPENDITURES IN THE PERIOD		

* 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)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				

Enter on page 1, line 6 →

* 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.

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				