



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Filed with: City of Salem Clerk & Election Commission

Fill in Reporting Period dates:

Beginning Date:

08/29/2021

Ending Date:

10/25/2021

CITY CLERK
SALEM, MASS.

Type of Report: (Check one)

☐ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

David N Freni Jr

Candidate Full Name (if applicable)

Ward 3 Councilor, Salem MA

Office Sought and District

5 Wyman Dr, Salem MA 01970

Residential Address

E-mail: dfreni3240@gmail.com

Phone # (optional):

Committee to Elect David Freni

Committee Name

Samantha Kezga

Name of Committee Treasurer

5 Wyman Dr, Salem MA 01970

Committee Mailing Address

E-mail: freni4ward3@gmail.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0.00

Line 2: Total receipts this period (page 3, line 11)

550.00

Line 3: Subtotal (line 1 plus line 2)

550.00

Line 4: Total expenditures this period (page 5, line 14)

0.00

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

550.00

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

2,200.47

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

0.00

Line 8: Name of bank(s) used: Eastern 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:

[Signature]

(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:

David Freni

(Candidate's signature)

Date: 10/25/2021

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)
10/25/2021	Committee to Elect Justin Whittier Charles Von Bruns, Treasurer	\$100	
06/15/2021	David Freni Jr 5 Wyman Dr Salem MA 01970	\$100	
10/06/2021	Linda Ferraresso 67 Aurora Ln Salem MA 01970	\$100	
07/21/2021	Mary Milton 10 Wyman Place, Salem MA 01970	\$100	
07/20/2021	Paul Lewandowski 16 Wyman Dr. Salem MA 01970	\$100	
09/12/2021	Richard Bencal 16 Grant Road, Salem MA 01970	\$50	

Line 9: Total Receipts over \$50 (or listed above) 550.00

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

Line 11: TOTAL RECEIPTS IN THE PERIOD \$550.00

← 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 A: RECEIPTS (continued)[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

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

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SCHEDULE B: EXPENDITURES (continued)[illegible]

* 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
06/15/2021	David Freni Jr	5 Wyman Dr Salem MA 01970	18x24 Corro Signs (200) Lapel Stickers (100) Wire Sign Holders (100)	1,508.75
07/19/2021	David Freni Jr		3x8 Banner (3)	
07/19/2021	David Freni Jr	5 Wyman Dr Salem MA 01970	2-S Full Color Palm Cards Artwork (1) (2500)	691.72
			Line 15: In-Kind Contributions over \$50 (or listed above)	2,200.47
			Line 16: In-Kind Contributions \$50 & under (not listed above)	
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	2,200.47

* 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)				

