

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts 2022 JAN 20 PM 2: 53	File with: City or Town Clerk or Election Commission				
Fill in Reporting Period dates:  Beginning Date: 01/0	1/2021 Ending Date: 01/20/2022				
Type of Report: (Check one)					
8th day preceding preliminary 8th day preceding election	☐ 30 day after election ⊠ year-end report ☐ dissolution				
Manny Cruz  Candidate Full Name (if applicable)  Salem School Committee  Office Sought and District	The Committee to Elect Manny Cruz  Committee Name  Dina Roman  Name of Committee Treasurer				
10 Whalers Lane, Unit 10 Salem MA	120 Washington Street, Floor 2, Work Bar, Salem MA				
Residential Address	Committee Mailing Address				
E-mail: onegoodsuit@gmail.com	B-mail: mannycruzsalem@gmail.com				
Phone # (optional): Phone # (optional):					
SUMMARY BALANC	TE INFORMATION:				
	SE INFORMATION.				
Line 1: Ending Balance from previous report	92.02				
Line 2: Total receipts this period (page 3, line 11	1,900				
Line 3: Subtotal (line 1 plus line 2)	1,992.02				
Line 4: Total expenditures this period (page 5, lin	ne 14) 1,722.97				
Line 5: Ending Balance (line 3 minus line 4)	177.03				
Line 6: Total in-kind contributions this period (p	age 6)				
Line 7: Total (all) outstanding liabilities (page 7)					
Line 8: Name of bank(s) used: Salem Five 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:    Dina   Permain   (Treasurer's signature)   Date:   01/19/2022					
	the best of my knowledge and belief, a true and complete statement of all campaign finance occordance with the requirements of M.G.L. c. 55. I have not received any contributions, ag 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 finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	ts, in-kind contributions and liabilities for this reporting period and represents the				
Signed under the penalties of perjury:  Manny Creez	(Candidate's signature) Date: 01/19/2022				

		*

## **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
<b>Date Received</b>	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
05/03/2021	Mass and Northern New England Laborers District Council	500	
09/17/2021	William Buckley	250	Legislative Aide, Commonwealth of MA
09/18/2021	Richard Moylan	250	Budget technician Veteran Affairs Health Administration
09/19/2021	Lisa Peterson	50	
09/19/2021	Linda Saris	250	Executive Director LEAP for Education
09/20/2021	Amanda Fernandez	100	
09/20/2021	Jeffrey Sanchez	200	Campaign Account Sanchez Committee
09/21/2021	Juana Matias	125	
09/21/2021	Constance Grayson	150	
10/5/2021	Veronica Faustino	25	
Line 9: Total Rece	ipts over \$50 (or listed above)	1,125	
Line 10: Total Reco	eipts \$50 and under* (not listed above)	0	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	1,900	← Enter on page 1, line 2

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

		<b>.</b>

## **SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	t		,
ine 9: Total Recei	pts over \$50 (or listed above)		L
	ipts \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD		Enter on page 1, line 2

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

		4

#### **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
04/2021	GoDaddy.com	Website	56.32
05/04	Godaddy.com	Website	12.99
05/28/2021	Godaddy.com	Website	31.16
06/04/2021	Godaddy.com	Website	9.99
07/06/2021	Godaddy.com	Website	10.99
08/04/2021	Godaddy.com	Website	10.99
09/04	Godaddy.com	Website	10.99
09/15/2021	Conolly Printing	sign printing	400.93
09/27/2021	Vistaprint	design services	5
10/01/2022	Godaddy.com	Website	10.99
Oct 13, 2021	Democratic Party of Massachusetts	Votebuilder	800
10/3/2021	Vista Print	Door hangers	287.74
	,	Line 12: Total Expenditures over \$50 (or listed above)	1,648
		Line 13: Total Expenditures \$50 and under* (not listed above)	2
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITURES IN THE PERIOD	1,650

<sup>\*</sup> 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 B: EXPENDITURES (continued)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Faita	(aiphabetteai listing)	7 Tudi ess	1 arpose of Expenditure	TAMOUNT
11.04	Godaddy.com		Website	10.99
11/30/2021	Facebook		Facebook Ads	40
12/04/2021	Godaddy.com	,,	Website	10.99
01/04/2022	Godaddy.com		Website	10.99
		Line 12: Expenditures over \$50	0 (or listed above)	
		Line 13: Expenditures \$50 and	under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	72.97

<sup>\*</sup> 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	
	,r		1	P	
	Line 15: In-Kind Contributions over \$50 (or listed above)				
		Line 16: In-Kind Contributions \$50 & under (not listed above)			
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS		

<sup>\*</sup> 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
				1

	*.