



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2022 Ending Date: 3/27/2022

Type of Report: (Check one)

8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

FAIRHAVEN,
MASS.

CHARLES K. MURPHY, SR.
Candidate Full Name (if applicable)
BOARD OF SELECTMAN - FAIRHAVEN
Office Sought and District
43 DANIEL STREET FAIRHAVEN MA
Residential Address 02719
E-mail: MOLife@aol.com
Phone # (optional): 774-930-5226

Committee to Elect Charles K. Murphy, Sr.
Committee Name
JOANNE M. REGO
Name of Committee Treasurer
43 DANIEL STREET FAIRHAVEN
Committee Mailing Address MASS 02719
E-mail: jrego26@comcast.net
Phone # (optional): 508-991-2929

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

1,230.16

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

7,395.00

Line 3: Subtotal (line 1 plus line 2)

8,625.16

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

4,248.16

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

4,377.00

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

-0-

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

-0-

Line 8: Name of bank(s) used:

ROCKLAND TRUST

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: Joanne M. Rego (Treasurer's signature)

Date: 3/27/2022

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: C. Murphy, Sr. (Candidate's signature)

Date: 3/27/2022

SCHEDULE A: RECEIPTS

Committee to elect
Charles K Murphy, SR

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)
3/7/2022	ALFERES, DARLENE 32 HAMLET STREET FAIRHAVEN, MA 02719	490.00	REALTOR ALFERES REALTY
3/10/2022	ARSENAULT, DENNIS 28 BRANDT ISLAND RD MATAPOISETT, MA 02739	500.00	SELF-EMPLOYED ROOFING
3/10/2022	ARSENAULT, KAREN 28 BRANDT ISLAND RD MATAPOISETT, MA 02739	500.00	RETIRED
3/6/2022	BLANCHARD, TRACIE 126 ADAM STREET FAIRHAVEN, MA 02719	90.00	
2/28/2022	CENTEIO, GREGORY 20 JUDSON DRIVE FAIRHAVEN, MA	90.00	
2/21/2022	CENTEIO, THERESA 340 WOOD STREET NEW BEDFORD, MA 02745	90.00	
2/26/2022	CHARETTE, CHARLENE 28 JUDSON DRIVE FAIRHAVEN, MA 02719	90.00	
3/2/2022	COSTA, KATHLEEN 14 CLIFFE AVE FAIRHAVEN, MA 02719	90.00	
3/6/2022	DURRIGAN, DONNA 4 PLEASANT STREET FAIRHAVEN, MA 02719	90.00	
2/21/2022	DWELLY, NANCY 396 ALDEN ROAD FAIRHAVEN, MA 02719	90.00	
3/6/2022	FRANCIS, TIMOTHY 25 RIVARD STREET FAIRHAVEN, MA 02719	90.00	
2/16/2022	HAALAND, JOHN 21 FORESTVIEW DRIVE FAIRHAVEN, MA 02719	90.00	
Line 9: Total Receipts over \$50 (or listed above)		2,300.00	
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		2,395.00	

2,300 page 2
1,580 page 3A
290 page 3B
3,225 3B

← Enter on page 1, line 2 Page 2 + Page 3A + 3B

* 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)

Committee to Elect
Charles K MURPHY, SR

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/6/2022	HINDS, JOHN 130 EBONY Street FAIRHAVEN, MA 02719	90.00	
2/5/2022	Levesque, Cheryl 42 DANIEL Street FAIRHAVEN, MA 02719	90.00	
3/5/2022	LIMA, MARIA JOSE 330 ALDEN ROAD FAIRHAVEN, MA 02719	90.00	
3/6/2022	LOPES, SHERRY 64 GREEN STREET FAIRHAVEN, MA 02719	135.00	
2/19/2022	MARQUES, Elizabeth 28 ROUNSEVILLE AVE SOMERSET, MA 02726	90.00	
3/3/2022	MELLO, Joyce 158 ALDEN ROAD FAIRHAVEN, MA 02719	90.00	
2/10/2022	MELLO, SHERRILYNN 17 FIELDSTONE CIRCLE WEST WAREHAM, MA 02576	90.00	
3/13/2022	Mitchell, Robert 7 FAIRLAWN AVENUE FAIRHAVEN, MA 02719	100.00	
3/1/2022	MONTEIRO, DAVID 112 BELLEVILLE ROAD NEW BEDFORD, MA 02745	90.00	
3/6/2022	O'CONNOR, Michael 32 LINDEN AVE FAIRHAVEN, MA 02719	315.00	LIABILITY ANALYSIS STAR INSURANCE CO.
3/6/2022	PACELLA, GARY 628 PLEASANT Street NEW BEDFORD MA 02719	100.00	
3/5/2022	PER PERAS, GLORIA 4 RIVERSIDE DRIVE MATTAPAN, MA 02730	100.00	
3/4/2022	PINTO, MARIA 66 LAUREL Street FAIRHAVEN, MA 02719	200.00	RETIRED
Line 9: Total Receipts over \$50 (or listed above)		1,580.00	
Line 10: Total Receipts \$50 and under* (not listed above)		-0-	
Line 11: TOTAL RECEIPTS IN THE PERIOD		7,395.00	

← Enter on page 1, line 2

2,300 PAGE 2
1,580 PAGE 3A
3,225 PAGE 3B
290

* 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/4/2022	PINTO, STEVEN 68 CENTER Street FAIRHAVEN, MA 02719	200.00	SELF EMPLOYED DENTIST
3/5/2022	SOUZA, GARY 14 BLOSSOM Street FAIRHAVEN, MA 02719	90.00	

Line 9: Total Receipts over \$50 (or listed above)	290.00	2,300 Page 2
Line 10: Total Receipts \$50 and under* (not listed above)	3,225.00	1,580 Page 3A
Line 11: TOTAL RECEIPTS IN THE PERIOD	7,395.00	390 Page 3B 3,225 Page 3B ← Enter on page 1, line 2 + page 2 + page 3A + 3B

* 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

Committee to Elect
Charles K Murphy, Sr

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
2/16/22	FHVN Neighborhood News	166 Dogwood St. FAIRHAVEN, MA 02719	Campaign AD	54.00
2/24/22	FHVN Neighborhood News	166 Dogwood St. FAIRHAVEN, MA 02719	Campaign AD	162.00
3/9/22	FHVN Neighborhood News	166 Dogwood St. FAIRHAVEN, MA 02719	Campaign AD	216.00
3/22/22	FHVN Neighborhood News	166 Dogwood St. FAIRHAVEN, MA 02719	Campaign AD	289.00
3/15/22	Levesque, Stephen	42 DANIEL ST. FAIRHAVEN, MA 02719	MATERIAL to signs MAKE CAMPAIGN	116.32
1/25/22	MALLARD PRINTING	657 QUARRY ST. FALL RIVER, MA 02723	YARD SIGNS 1/2 PAYMENT	631.00
3/9/22	MALLARD PRINTING	657 QUARRY ST. FALL RIVER, MA 02723	YARD SIGNS 1/2 PAYMENT	630.72
3/6/22	The PASTA House	100 ALDEN ROAD FAIRHAVEN, MA 02719	EXPENSE FOR SERVICE FOOD - CAMPAIGN FUNDRAISER	1,849.12
3/6/22	The PASTA House	100 ALDEN ROAD FAIRHAVEN, MA 02719	EXPENSE FOR FOOD + SERVICE CAMPAIGN FUNDRAISER	300.00
Line 12: Total Expenditures over \$50 (or listed above)				4,248.16
Line 13: Total Expenditures \$50 and under* (not listed above)				—0—
Line 14: TOTAL EXPENDITURES IN THE PERIOD				4,248.16

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). *Committee to Elect Charles R. Murphy, SR*

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

Line 12: Expenditures over \$50 (or listed above)	- 0 -
Line 13: Expenditures \$50 and under* (not listed above)	- 0 -
Line 14: TOTAL EXPENDITURES IN THE PERIOD	- 0 -

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 C: "IN-KIND" CONTRIBUTIONS

*Committee to
elect
Charles K. Murphy, Sr.*

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)	- 0 -
Line 16: In-Kind Contributions \$50 & under (not listed above)	- 0 -
Line 17: TOTAL IN-KIND CONTRIBUTIONS	- 0 -

* 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

Committee to Elect Charles K Murphy, SR.

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)**

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