

Form CPF M 102: Campaign Finance Report Municipal Compaign and Political Finance SOARD OF ELECTION

2020 JAN -6 PH 12: 14

File with:

City or Town Clerk or Election Commission

Reporting Period - Beginning: 10/28/2019 Ending: 12/31/2019

Type of report: Year-end

Bruce Oliveira

Full Name of Candidate

School Committee

Office Sought/ District

119 Plymouth Street New Bedford, MA 02740

Residential Address

Committee to Elect Bruce J. Oliveira

Committee Name

Maryanne Toomey

Name of Committee Treasurer

119 Plymouth Street

New Bedford, MA 02740

Committee Address

SUMMARY BALANCE INFORMATION

Ending Balance from previous report: \$8,514.33 Total receipts this period: \$0.00 Subtotal: \$8,514.33 Total expenditures this period: \$2,545.20 Ending Balance: \$5,969.13 Total inkind contributions this period: \$0.00 Total outstanding liabilities: \$0.00 Name of bank(s) used:

Webster 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, inkind 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:

manjanne loomen Treasurer' signature (in in

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, and 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 and 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, inkind 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:

1/3/2020

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.

Date	Name and Residential Address	Amount	Occupation and Employer
	emized Receipts Etemized Receipts Ceipts	\$0.00 \$0.00 \$0.00	

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 over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
11/5/2019	Cafe Restaurante Algarve 128 County St New Bedford, MA 02744	\$1,110.00	After Election Party
12/5/2019	Hall Communications Inc 75 Oxford St Suite 402 Providence, RI 02905	\$200.00	Advertising WNBH
11/4/2019	Hall Communications Inc 75 Oxford St Suite 402 Providence, RI 02905	\$200.00	Advertising
12/9/2019	Hawthorn Florist 87 Dartmouth St New Bedford, MA 02740	\$260.31	Gifts For Supporters
11/13/2019	Markey Committee 48 William Street Dartmouth, MA 02748	\$100.00	15107 Contribution
11/26/2019	NBHS Gridiron Club 230 Hathaway Blvd New Bedford, MA 02740	\$140.00	Advertising
10/31/2019	Scholastic Inc Po Box 3725 Jefferson City, MO 65102	\$109.89	Donation School Supplies
11/13/2019	The Ferreira Committee Po Box 176 Somerset, MA 02726	\$100.00	Fundraiser Ticket
12/5/2019	Townsquare Media 22 Sconticut Neck Rd Fairhaven, MA 02719	\$225.00	Advertising Wbsm
	zed Expenditures	\$2,445.20	
Total Unite Total Expen	mized Expenditures ditures	\$100.00 \$2,545.20	

Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind 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. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description Occupation/Employer
Total Item	ized Inkind Contributions	\$0.00	
Total Unit	emized Inkind Contributions	\$0.00	
Total Inki	nd Contributions	\$0.00	

. . .

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 the liabilities incurred during this reporting period.

Date To Whom Due Amount Purpose

Total Outstanding Liabilities

. . . .

\$0.00



Form CPF M 102: Campaign Finance Report RECEIVED

Municipal Form

Office of Campaign and Political Finance

2019 OCT 28 AH 8: 53 COMMISSIONE BELO

File with:

City or Town Clerk or Election Commission

Reporting Period - Beginning: 9/23/2019 Ending: 10/27/2019

Type of report: Pre-election

Bruce Oliveira

Full Name of Candidate

School Committee

Office Sought/ District

119 Plymouth Street New Bedford, MA 02740

Residential Address

Committee to Elect Bruce J. Oliveira

Committee Name

Maryanne Toomey

Name of Committee Treasurer

119 Plymouth Street

New Bedford, MA 02740

Committee Address

SUMMARY BALANCE INFORMATION

Ending Balance from previous report: \$9,339.33 Total receipts this period: \$0.00 Subtotal: \$9,339.33 Total expenditures this period: \$825.00 Ending Balance: \$8,514.33 Total inkind contributions this period: \$0.00 Total outstanding liabilities: \$0.00

Name of bank(s) used:

Webster 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, inkind 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:

· manganne Jooney Treasurer's signature (in in

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, and 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 and 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, inkind 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.

10/27/19

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.

Date	Name and Residential Address	Amount	Occupation and Employer
	ized Receipts emized Receipts ipts	\$0.00 \$0.00 \$0.00	

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 over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
10/12/2019	Friends of Child & Family Services 3057 Acushnet Ave New Bedford, MA 02745	\$130.00	Donation
10/7/2019	Hall Communications Inc 75 Oxford St Suite 402 Providence, RI 02905	\$200.00	Advertising
9/26/2019	NBHS Girls Volleyball Hathaway Blvd New Bedford, MA 02740	\$100.00	Donation
9/24/2019	Normandin Music Dept 81 Felton St New Bedford, MA 02745	\$100.00	Donation
10/18/2019	Prince Henry Society P O Box 6762 New Bedford, MA 02742	\$200.00	Donation
	zed Expenditures mized Expenditures ditures	\$730.00 \$95.00 \$825.00	

Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind 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. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Dat	te Name and Residential Address	Value	Description Occupation/Employer
Total	Itemized Inkind Contributions	\$0.00	
Total	Unitemized Inkind Contributions	\$0.00	
Total	Inkind Contributions	\$0.00	

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 the liabilities incurred during this reporting period.

Date To Whom Due Amount

Total Outstanding Liabilities

\$0.00

Purpose