



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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CITY CLERK'S OFFICE
CITY OF MARLBOROUGH

2023 OCT 30 PM 2:28
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 11-2-2021 Ending Date: 10-30-2023

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

SCOTT M. KING
Candidate Full Name (if applicable)

COUNCILOR-AT-LARGE
Office Sought and District

811 PLANSWAT ST. MARLBOROUGH
Residential Address

Telephone Number (optional): 774-262-0847

COMMITTEE TO ELECT SCOTT KING
Committee Name

KALIE M. KING
Name of Committee Treasurer

811 PLANSWAT ST. MARLBOROUGH
Committee Mailing Address

Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period	<u>\$ 2,115.78</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$ 2,115.78</u>
Line 4: Total expenditures this period	<u>\$ 1,768.71</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>347.07</u>
Line 6: Total in-kind contributions this period	<u>0</u>
Line 7: Total (all) outstanding liabilities	<u>0</u>
Line 8: Name of bank(s) used:	<u>MAIN STREET BANK</u>

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: Kalie King (Treasurer's signature) Date: _____

FOR CANDIDATE FILINGS ONLY: 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 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.

Candidate without Committee OR Candidate with independent activity filing separate report
 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Scott M. King (Candidate's signature) Date: _____

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
7-7-2023	RICHARD COLLINS 30 WHITE TERRACE, MARLBOROUGH	\$ 250.00	Funeral Home Director
8-14-2023	RICHARD AAKER 81 LINCOLN ST. BOSTON	\$ 50.00	
7-17-2023	ROBERT TUSSUOMO	\$ 95.70	
7-31-2023	SEAN & LUCA BUTLER FERROCHIA DR. MARLBOROUGH	\$ 287.70	STITCH THIS
8-23-2023	ANN HELEN 54 STACY RD. MARLBOROUGH	\$ 95.70	
9-19-2023	KAYLEO MONROY 108 HOWE ST. #2 MARLBOROUGH	\$ 23.70	
9-18-2023	PATRICIA TOKI 95 ANDERSON RD. MARLBOROUGH	\$ 287.70	MEDICAL ASSISTANT
9-27-2023	PAUL MCCARTHY 37 TREMONT ST. MARLBOROUGH	\$ 95.70	
10-7-2023	PAUL VALIANTE 126 FANBORO ST. MARLBOROUGH	\$ 47.70	
8-10-2023	SCOTT KING 811 PLEASANT STREET	\$ 881.58	

Line 9: Total Receipts over \$50 (or listed above) 2,115.78

Line 10: Total Receipts \$50 and under* (not listed above) 0

Line 11: TOTAL RECEIPTS IN THE PERIOD 2,115.78

← 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.

