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Form CPF M 102: Campaign Finance Report-5 P 1: 55
Municipal Form

Office of Campaign and Political Finance

CITY CLERK
FALL RIVER, MA

Commonwealth
of Massachusetts

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning January 1 2017 Ending August 25 2017

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

Crystal O. Stone
Full Name of Candidate (if applicable)
School Committee - Fall River
Office Sought and District
139 Ray St #1, Fall River MA
Residential Address 02720
774-294-8819
Tel. No. (optional)
E-mail: stone.campaign@gmail.com

Committee to Elect Crystal Stone
Committee Name
Patrick A. Stone
Name of Committee Treasurer
149 Ray St, Fall River, MA 02720
Committee Mailing Address
774-294-3271
Tel. No. (optional)
E-mail: patrick.stone555@gmail.com

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>0</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>1655.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>1655.00</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>1655.00</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>0</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>854</u>
Line 8: Name of bank(s) used	<u>Bay Coast 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:
[Signature] Date 9/5/17
Treasurer's signature (in ink)

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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:
Crystal O. Stone Date September 5, 2017
Candidate signature (in ink)

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.

This page may be copied 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)
7/28/17	Abuiar, Scott 505 Forbes St, Riverside, RI 02915	\$ 30.00	
8/20/17	Almeida, Eva 96 Hilltop Rd East Providence, RI 02914	\$ 50.00	
8/16/17	Bisch, Sarah 233 Washington St, Fall River, MA 02720	\$ 30.00	
8/16/17	Cabral, Roger 66 Norman St New Bedford, MA 02744	\$ 30.00	
8/1/17	Cameron, Sally 2 Shaw Rd Carver, MA 02330	\$ 80.00	
7/31/17	Higgins, Patricia 17 Stevie Rd Greenville, RI 02828	\$ 10.00	
8/10/17	Hoyt, Denise 206 Jepson St, Fall River, MA 02723	\$ 25.00	
8/10/17	Hoyt, Jocelyn 149 Ridge St, Fall River, MA 02720	\$ 30.00	
8/16/17	Johnson, Joan 881 Belleville Ave, New Bedford, MA 02740	\$ 25.00	
8/16/17	Mayhew, Jessica 1 Ponks Way Assonet, MA 02702	\$ 30.00	
8/10/17	Oliveira Sr, Joseph 63 Buffinton St, Fall River, MA 02721	\$ 60.00	
8/14/17	Oliveira Jr, Joseph 63 Buffinton St, Fall River, MA 02721	\$ 30.00	
8/16/17	Pereira, Shelli PO Box 2822, Fall River, MA 02722	\$ 30.00	
8/16/17	Ponte, Cliff 1217 Meridian St, Fall River, MA 02720	\$ 80.00	
8/14/17	Quintal, Jairo 451 Division St, Fall River, MA 02722	\$ 130.00	
Line 9: Total receipts in excess of \$50 (or listed above)		630.00	
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1655.00	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.

Crystal Stone for School Committee

page 2

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)
7/31/17	Rebello, Nadia 980 Elsbree St, Fall River, MA 02720	\$30.00	
8/12/17	Santana, Elizabeth 724 Maple St, Fall River, MA 02720	\$85.00	
7/14/2017	Schachne, Jason 1030 President Ave, Fall River, MA 02720	\$500.00	Cardiologist, South Coast Health Systems
8/16/2017	Scott-Pacheco, Erica 187 Pitman St, Fall River, MA 02721	\$30.00	
7/29/17	Silva, Anne 140 Summerfield St, Fall River, MA 02720	\$30.00	
8/16/17	Silva, Britche 56 Conant St, Fall River, MA 02720	\$60.00	
8/13/17	Silva, Christine 777 Smoke Rise Circle Swansea, MA 02720	\$30.00	
8/16/17	Smith, Kimberly 119 Rockland St, Fall River, MA 02724	\$30.00	
7/21/17	Stone, Marie 149 Ray St, Fall River, MA 02720	\$130.00	
8/16/17	Vincent, Jennifer 4 Mill Village Rd, Swansea, MA 02779	\$30.00	
8/16/17	Viveiros, Derek 1557 Edeson St, Fall River, MA 02720	\$30	
Line 9: Total Receipts over \$50 (or listed above)		985.	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1655.00	← 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 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
8/14/17	Adagio Piano Lounge	227 S. Main St. Fall River, MA 02720	Fundraiser venue	650.00
8/1/17	John Fonseca videography	95 Grace Street Cranston, RI 02910	Candidate Videos for Social Media	250.00
8/10/17	OJurnal	207 Pocasset St Fall River, MA 02720	newspaper Ad	\$195.00
8/24/17	Staples office supply	416 Williams. Canning Blvd Fall River, MA 02721	voter list BOOK (printed & bound)	\$36.65
7/22/17	Vistaprint	Vistaprint.com 800-961-2015	rack cards + door hangers	451.64
8/17/17	wordpress	wordpress.com	Candidate website	\$71.71

Line 12: Total Expenditures over \$50 (or listed above) 1655.

Line 13: Total Expenditures \$50 and under* (not listed above)

Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD** 1655.

* If you have itemized expenditures of \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized

