



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

MAY 13 2021 PM 1:41

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 3-25-21 Ending Date: 5-8-21

Type of Report: (Check one)

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

James P. Healy
Candidate Full Name (if applicable)
Board of Assessors
Office Sought and District
174 W. State St. Granby Ma.
Residential Address
E-mail: JPHealy@Amherst.edu
Phone # (optional): 413 505 9759

Committee Name
Name of Committee Treasurer
Committee Mailing Address
E-mail:
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

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

Line 3: Subtotal (line 1 plus line 2)

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

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

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

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

Line 8: Name of bank(s) used:

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446.25
446.25
—
446.25
—
—

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:

(Treasurer's signature)

Date:

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:

(Candidate's signature)

Date:

5/13/21

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(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.)

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

Country	1950	1960	1970	1980	1990	2000	2010	2020	2030	2040	2050
Japan	7	8	10	12	14	16	18	20	22	24	26
Germany	10	11	12	13	14	15	16	17	18	19	20
France	11	12	13	14	15	16	17	18	19	20	21
Italy	12	13	14	15	16	17	18	19	20	21	22
Spain	13	14	15	16	17	18	19	20	21	22	23
Sweden	14	15	16	17	18	19	20	21	22	23	24
Belgium	15	16	17	18	19	20	21	22	23	24	25
United Kingdom	16	17	18	19	20	21	22	23	24	25	26
Canada	17	18	19	20	21	22	23	24	25	26	27
United States	18	19	20	21	22	23	24	25	26	27	28
China	19	20	21	22	23	24	25	26	27	28	29
India	20	21	22	23	24	25	26	27	28	29	30
South Africa	21	22	23	24	25	26	27	28	29	30	31
South Korea	22	23	24	25	26	27	28	29	30	31	32
Poland	23	24	25	26	27	28	29	30	31	32	33
Portugal	24	25	26	27	28	29	30	31	32	33	34
Spain	25	26	27	28	29	30	31	32	33	34	35
Italy	26	27	28	29	30	31	32	33	34	35	36
France	27	28	29	30	31	32	33	34	35	36	37
Germany	28	29	30	31	32	33	34	35	36	37	38
Japan	29	30	31	32	33	34	35	36	37	38	39
China	30	31	32	33	34	35	36	37	38	39	40
India	31	32	33	34	35	36	37	38	39	40	41
South Africa	32	33	34	35	36	37	38	39	40	41	42
South Korea	33	34	35	36	37	38	39	40	41	42	43
Poland	34	35	36	37	38	39	40	41	42	43	44
Portugal	35	36	37	38	39	40	41	42	43	44	45
Spain	36	37	38	39	40	41	42	43	44	45	46
Italy	37	38	39	40	41	42	43	44	45	46	47
France	38	39	40	41	42	43	44	45	46	47	48
Germany	39	40	41	42	43	44	45	46	47	48	49
Japan	40	41	42	43	44	45	46	47	48	49	50
China	41	42	43	44	45	46	47	48	49	50	51
India	42	43	44	45	46	47	48	49	50	51	52
South Africa	43	44	45	46	47	48	49	50	51	52	53
South Korea	44	45	46	47	48	49	50	51	52	53	54
Poland	45	46	47	48	49	50	51	52	53	54	55
Portugal	46	47	48	49	50						

← 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.

Enter on page 1, line 4 →

Page 4

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			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 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	

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
Enter on page 1, line 7 →		Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)		

Invoice

Date	Invoice #
4/16/21	56337

SUNRAISE PRINTING
322 RUSSELL ST
HADLEY MA 01035
413-586-7133

inal ID: *****415 ***8

/21 2:50 PM

DEBIT - INSERT
A0000000031010
#: *****2818

IT SALE
110632846336 REF #: 0627
H 161 AUTH #: 582296

RIPTION

NT \$446.25

APPROVED

ARQC - 05DPA90AE19A6AF1

CUSTOMER COPY

street

Phone

Fax

P.O. No.	Terms
	Due on Receipt
Rate	Amount
12.00	420.00T
Sales Tax (6.25%)	\$26.2
Total	\$446

Description
24x18 Coroplast Signs: Jim Healy Board of Assessors.

Tel: 413-586-7133 Fax: 413-586-7166 print@sunraiseprinting.com www.sunraiseprinting.com
Past due balances may be subject to late fees and/or interest of 1.5%/month (18% per year)



Form CPF M 102-0: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

Please print or type all information, except signatures.

City or Town of:

Reporting Period: Beginning: 05-08-2021 Ending: 06-17-2021
(MM/DD/YYYY) (MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary ☐ 8th day preceding election ☒ 30th day following election (town or special) ☐ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]