



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/2024 Ending Date: 04/29/2025

Type of Report: (Check one)

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

Hunter Young

Candidate Full Name (if applicable)

School Committee

Office Sought and District

107 Hollis Road, Plymouth, MA 02360

Residential Address

E-mail: hunteryoung510@gmail.com

Phone #: 508-209-7502

Committee to Elect Hunter Young

Committee Name

Teresa Brignoli

Name of Committee Treasurer

24 Nancy Drive, Plymouth, MA 02360

Committee Mailing Address

E-mail: terysb3@gmail.com

Phone #: 508-509-7888

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>1624.80</u>
Line 2: Total receipts this period (page 3, line 12)	<u>4170.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>5794.80</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>2657.01</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>3137.59</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>0</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>0</u>
Line 9: Name of bank(s) used:	<u>Rockland Trust</u>

RECEIVED  
TOWN CLERK'S OFFICE  
PLYMOUTH, MA  
2024 MAY 12 AM 10:01  
04557

### 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:

Teresa Brignoli

(Treasurer's signature)

Date: 05/09/2025

### 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:

Hunter Young

(Candidate's signature)

Date: 5/09/2025

M102 (12/2023)

## SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities. *Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.*

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
04/25/25	Kenneth & Wendy Begin, 204 Valley Rd, Plymouth MA 02360	\$500.00	retired
04/05/25	Sandra Brogan, 15 Trinas Path Plymouth MA 02360	\$100.00	
02/05/25	Jesse Brown, 61 John Alden Rd, Plymouth MA 02360	\$500.00	owner/Heidrea Communications
01/02/25	Robert Colburn, 81 Hiawatha Rd Plymouth MA 02360	\$100.00	
01/10/25	Joanne Curran, 10 Morton Park Rd, Plymouth MA 02360	\$100.00	
01/02/25	Christopher Fava, 200 Watercourse Place, Plymouth MA 02360	\$100.00	
04/25/25	Karen Flaherty, 533 Wareham Rd, Plymouth MA 02360	\$100.00	
04/11/25	Robert Kenney, 20 Taylor Point Ave, Pembroke MA 02359	\$100.00	
01/10/25	Kari MacCrae, 41 Yearling Run Rd, Bourne MA 02532	\$100.00	
04/25/25	James & Shelley McMahon, 14 Canal Vie Rd, Buzzards Bay, MA 02532	\$200.00	Attorney
03/26/25	Getchen & Joseph Meeks, 229 Pleasant St, So Chatham MA 02659	\$100.00	
03/26/25	Samuel Miele & Elisabeth Seymour, 108 Lyndsey Way, Sandwich MA 02563	\$300.00	Mason

**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
04/03/25	Jeffrey Miele, 108 Lyndsey Way, Sandwich MA 02563	\$100.00	
04/03/25	Mathew Muratore, 15 Gabriel Ln, Plymouth MA 02360	\$250.00	Managing Partner (EF Senior Care)
04/04/25	Maryann Nardone, 17 Galleon Dr, Plymouth MA 02360	\$75.00	
01/08/25	Shane Rogers, 6 Mellow St, East Falmouth MA 02536	\$100.00	
03/26/25	Susan & Jeffrey Schofield, 30 James Rd, Duxbury MA 02332	\$250.00	Mgr /Schofield Properties LLC
01/10/25	Christopher Thibeault, 140 Riley Ave, Somerset MA 02726	\$150.00	
01/10/25	Thomas Wallace, 30 Highland Terrace, Plymouth MA 02360	\$500.00	retired
04/25/25	Bruce & Marjorie Young, 594 Indian Head St, Hanson MA 02341	\$100.00	
Line 10: Total Receipts over \$50 (or listed above)		\$3825.00	<i>* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.</i>
Line 11: Total Receipts \$50 and under (not listed above)		\$345.00	
Line 12: TOTAL RECEIPTS IN THE PERIOD		\$4170.00	

← Enter on page 1, line 2

## SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. *Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.*

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
01/10/25	GoDaddy.com		Domain/Webhosting	\$143.93
03/04/25	Hockomock Digital		Campaign Consulting	\$1000.00
04/01/25	Hockomock Digital		Print Materials	\$534.50
04/29/25	Mass GOP		Coordinated Services	\$513.80
04/25/25	Meta		Facebook ads	\$115.02
04/02/25	Plymouth Public House	2294 State Rd, Plymouth MA 02360	Fundraiser Event	\$250.00
01/21/25	Web.com	Jacksonville, FL	Website Builder	\$66.27

**SCHEDULE B: EXPENDITURES (continued)**[illegible]

*\* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.*

Enter on page 1, line 4 →

Line 13: Expenditures over \$50 (or listed above)

2623.52

Line 14: Expenditures \$50 and under (not listed above)

33.49

**Line 15: TOTAL EXPENDITURES IN THE PERIOD**

2657.01

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

M.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. *Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.*

[illegible]

## SCHEDULE D: LIABILITIES

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and the outstanding balance, as well as those liabilities incurred during this reporting period.*

[illegible]

Enter on page 1, line 7 →

**Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)**

0



## SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. *Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.*

Date Paid	Name and Address of Vendor (alphabetical listing required)	Amount	Purpose of Expenditure
Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50 (or listed above)		0	<i>* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.</i>
Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and under (not listed above)		0	
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD		0	

← Enter on page 1, line 8      Page 8