



Commonwealth of Massachusetts

Form CPF 111: REPORT OF ASSOCIATION OR OTHER GROUP MAKING CONTRIBUTIONS TO OR EXPENDITURES ON BEHALF OF CANDIDATES, PACS OR PARTY COMMITTEES

Office of Campaign and Political Finance
One Ashburton Place
Boston, MA 02108
(617) 727-8352

Fill in dates: Reporting Period Beginning: 1/1/07 Ending: 12/31/07

State/County Candidates, PACs & Party Committees - Type of Report: (Check one)

8th day preceding primary 8th day preceding election January 20th

Municipal Candidates - Type of Report: (Check one)

8th day preceding primary 8th day preceding election 30 days after election (Towns only) January 20th

1. Name of Association or Group

Mass Nurses Association

2. Address

340 Turnpike Street, Canton, MA 02021

3. Name and Title of Principal Officers

Beth Pirknick, President

Julie Rinkham, Executive Director

Determination of incidental threshold:

- 1. Total gross revenues of previous calendar year \$ 15,499,878
- 2. 10% of line 1 or \$15,000, whichever is less \$ 15,000.00
- 3. Total expenditures, donations to committees and liabilities during calendar year \$ 14,660.86

*If line 3 exceeds line 2, reports are required for the stated calendar year.

POLITICAL EXPENDITURES AND CONTRIBUTIONS TO CANDIDATES/COMMITTEES

(Attach additional pages if necessary)

Date Paid	To Whom Paid (Alphabetical listing)	Address	Purpose	Amount or Value**
	<u>please see</u>	<u>attached</u>	<u>chart</u>	

Total expenditures/contributions on this report 14,660.86

Total expenditures/contributions previously reported 14,660.86

Total expenditures/contributions to date 14,660.86

**In-kind contributions should also be included here.

CAMPAIGN & POLITICAL OVER

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LIABILITIES*

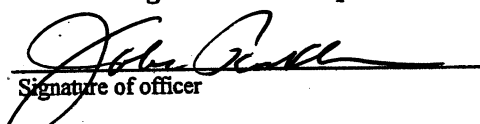
Date Incurred	To Whom Due	Address	Purpose	Amount
Total liabilities on this report				
Liabilities previously reported and still outstanding				
Total outstanding liabilities**				

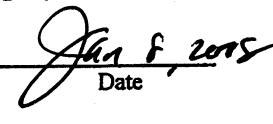
* A liability exists and must be reported if the association or group has received a good or service that it has not paid for, even if the association or group has not received a bill or invoice. If the amount of the liability has not been determined or is in dispute, the liability should be estimated or reported as "to be determined" or "in dispute."

** Final report must show zero liabilities.

I certify that this report is a true statement of the amount or value of every gift, payment, expenditure or contribution or promise to give, pay, expend or contribute, together with the date, purpose and full name and address of the person to who it was made.

Signed under the penalties of perjury.




 Date

WHO NEEDS TO FILE THIS FORM? Once an organization has made political contributions or expenditures or incurred liabilities to support candidates or political committees in excess of the "incidental threshold" (i.e., \$15,000 or 10% of such organization's gross revenues for the previous year, whichever is less), a duly qualified officer must file this report. The report must disclose all contributions and expenditures made and liabilities incurred during the calendar year. The obligation to file a report continues for each year thereafter until the year after a year in which the incidental threshold is not reached.

WHERE SHOULD THIS FORM BE FILED?

State and County Candidates or Committees: If contributions or expenditures are made to support or oppose state or county candidates or committees this form should be filed with OCPF.

Municipal Candidates or Committees: If contributions or expenditures are made to support or oppose municipal candidates or committees this form should be filed with the city or town clerk or election commission.

WHERE CAN I GET MORE INFORMATION?

OCPF Interpretive Bulletin IB-88-01

Call OCPF at (617) 727-8352 or (800) 462-OCPF

CAMPAIN & POLITICAL FINANCE

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Form CPF 111

Political Expenditures and Contributions to Candidates/Committees

<u>Date</u>	<u>To Whom</u>	<u>Address</u>	<u>Purpose</u>	<u>Amount</u>
5/21/07	Anthony Petruccelli (Please see attached Forms 18A)		Independent Expenditures	\$4,379.00
9/7/07	Anthony Galluccio (Please see attached Forms 18A)		Independent Expenditures	\$3,900.51
11/9/07	Charlie Murphy (Please see attached Forms 18A)		Independent Expenditures	\$972.75
11/9/07	Jim Marzilli (Please see attached Forms 18A)		Independent Expenditures	\$5,408.60

Total Expenditures/contributions on this report	\$14,660.86
Total Expenditures/contributions previously reported	\$14,660.86
Total Expenditures/contributions to date	\$14,660.86

CAMPAIGN & POLITICAL FINANCE

JAN 10 11:17



**Form CPF 18A: Report of Independent Expenditures
Promoting Election or Defeat of Candidate(s)**

Office of Campaign and Political Finance

2008 JAN 10 A 11:17
CAMPAIGN & POLITICAL
FINANCE

Commonwealth
of Massachusetts
Office of Campaign and Political Finance
One Ashburton Place, Room 411
Boston, MA 02108
(617) 727-8352

1. Date of report:

5/21/07

Must be filed within 7 business days of expenditure(s) in excess of \$100 in the aggregate

2. Expenditure(s) made by:

Massachusetts Nurses Association
Name of individual or group making expenditures

340 Turnpike St. Canton MA 02021
Street Address City/Town State/ZIP

3. Candidate(s) supported or opposed by expenditure(s) and office(s) sought:

Anthony Petruccelli

4. Expenditure(s) were made to (check one): support / oppose _____ the named candidate(s).

5. Expenditure(s) (attach additional sheets if necessary):

Date Paid	To Whom Paid	Address	Purpose	Amount
5/17/07	Sir Speedy Braintree	230 Wood Rd. Braintree, MA 02184	mail house + postage	\$2780
5/17/07	Lindenmeyr Munroe	20 Freedom Way Franklin, MA 02038	formail piece card stock	\$300
5/17/07	Mass Nurses Assn - Inkind	340 Turnpike St. Canton, MA 02021	plates + ink	\$125
5/18/07	Mass Nurses Assn - Inkind	340 Turnpike St. Canton, MA 02021	staff time (labor) + overhead	\$1,168
TOTAL				\$4,379

I hereby certify the expenditures noted are independent expenditures, as defined by M.G.L. c. 55, section 18A:

(1) the individual(s) or group who made the expenditure(s) described herein did not solicit or receive any contributions in contemplation of such expenditure(s); and (2) the individual(s) or group who made the expenditure(s) described herein did not cooperate, consult or act in concert with or at the request or suggestion of any candidate, or political committee organized on behalf of any candidate, or any agent of a candidate or any political committee in making such expenditure(s).

I further certify that all statements made herein are true and accurate.

Signed under the penalties of perjury:

Andrea Mullin
Signature

5/21/07
Date

Andrea Mullin, Legislative Director
Print name of individual signer and title (if signing on behalf of a group)

3988



Form CPF 18A: Report of Independent Expenditures Promoting Election or Defeat of Candidate(s)

Office of Campaign and Political Finance

Commonwealth of Massachusetts
Office of Campaign and Political Finance
One Ashburton Place, Room 411
Boston, MA 02108
(617) 727-8352

2008 JAN 10 A 11:17
CAMPAIGN & POLITICAL FINANCE

1. Date of report:

Sept 7~~0~~, 2007

Must be filed within 7 business days of expenditure(s) in excess of \$100 in the aggregate

2. Expenditure(s) made by:

Mass. Nurses Association (MNA)

Name of individual or group making expenditures

340 Turnpike St. Canton 02021

Street Address

City/Town

State/ZIP

3. Candidate(s) supported or opposed by expenditure(s) and office(s) sought:

Anthony Galluccio

4. Expenditure(s) were made to (check one): support / oppose the named candidate(s).

5. Expenditure(s) (attach additional sheets if necessary):

Date Paid	To Whom Paid	Address	Purpose	Amount
9/5/09	MNA - inhouse contribution	340 Turnpike St Canton	design & printing of mail; database work	\$867. ⁰⁰
9/5/09	Saltus Press	24 Solma Rd. Worcester	mail house prep	\$475.64
9/5/09	US Postal Service	Canton, MA	postage	\$2,557.87
TOTAL				\$3900.51

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I further certify that all statements made herein are true and accurate.

Signed under the penalties of perjury:

Signature Date 8/10/07

Andrea Mullin, Legislative Director
Print name of individual signer and title (if signing on behalf of a group)



**Form CPF 18A: Report of Independent Expenditures
Promoting Election or Defeat of Candidate(s)**

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

Office of Campaign and Political Finance
One Ashburton Place, Room 411
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(617) 727-8352

2008 JAN 10 A 11:17
CAMPAIGN & POLITICAL
FINANCE

1. Date of report:

11/9/07
Must be filed within 7 business days of expenditure(s) in excess of \$100 in the aggregate

2. Expenditure(s) made by:

Mass Nurses Association
Name of individual or group making expenditures
340 Turnpike St. Canton 02021
Street Address City/Town State/ZIP

3. Candidate(s) supported or opposed by expenditure(s) and office(s) sought:

Charlie Murphy

4. Expenditure(s) were made to (check one): support / oppose the named candidate(s).

5. Expenditure(s) (attach additional sheets if necessary):

Date Paid	To Whom Paid	Address	Purpose	Amount
11/9/07	MNA - in house contribution	340 Turnpike St. Canton, MA	design, print, data-base work of mail piece	\$ 285 ⁰⁰
11/9/07	Saltus Press	24 Solma Rd. Worcester 01604	mail house	\$109.75
11/5/07	US Postal Service	Canton, MA	Postage	\$523 ⁰⁰
11/5/07	MNA - in house contribution	340 Turnpike St. Canton, MA	materials for mail piece - plates, paper, ink	\$55 ⁰⁰
TOTAL				\$972.75

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I further certify that all statements made herein are true and accurate.

Signed under the penalties of perjury:

Andrea Mullin 11/9/07
Signature Date

Andrea Mullin, Legislative Dir.
Print name of individual signer and title (if signing on behalf of a group)



**Form CPF 18A: Report of Independent Expenditures
Promoting Election or Defeat of Candidate(s)**

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CAMPAIGN & POLITICAL
FINANCE

1. Date of report:

11/9/07

Must be filed within 7 business days of expenditure(s) in excess of \$100 in the aggregate

2. Expenditure(s) made by:

Mass Nurses Association

Name of individual or group making expenditures

340 Turnpike St. Canton 02021

Street Address

City/Town

State/ ZIP

3. Candidate(s) supported or opposed by expenditure(s) and office(s) sought:

Jim Marzilli

4. Expenditure(s) were made to (check one): support / oppose the named candidate(s).

5. Expenditure(s) (attach additional sheets if necessary):

Date Paid	To Whom Paid	Address	Purpose	Amount
11/5/07	Precision Communications	2601 Georgia Ave. Silver Spring, MD 20910	phoning + voter ID	\$845.20
11/5/07	MNA In-house Contribution	340 Turnpike St. Canton 02021	design, print + database work for mail pieces	\$607 ⁰⁰
11/5/07	Sattus Press	24 Tolman Rd. Worcester 01604	Mail house	\$553.40
11/5/07	US Postal Service	Canton, MA	postage	\$3068.00
11/5/07	MNA - In house Contribution	340 Turnpike St. Canton 02021	materials for mailing - plates, paper, ink	\$335 ⁰⁰
TOTAL				\$5408.60

I hereby certify the expenditures noted are independent expenditures, as defined by M.G.L. c. 55, section 18A:

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I further certify that all statements made herein are true and accurate.

Signed under the penalties of perjury:

Andrea Mullin 11/9/07
Signature Date

Andrea Mullin, Legislative Dir.
Print name of individual signer and title (if signing on behalf of a group)