



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

27 OCT '25 PM 1:10
BARNSTABLE TOWN CLERK

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/4/25 Ending Date: 10/27/25

Type of Report: (Check one)

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

Christopher Robert Laurzon
Candidate Full Name (if applicable)
Barnstable Housing Authority Board of Commissioners
Office Sought and District
443 Flint Street Marston Mills, MA 02648
Residential Address
E-mail: clauzo1.lsu@gmail.com
Phone #: 774-251-1989

Laurzon Committee
Committee Name
Linda Laurzon
Name of Committee Treasurer
429 Flint Street Marston Mills, MA 02648
Committee Mailing Address
E-mail: linbob6364@comcast.net
Phone #: 508-364-7592

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>1108.56</u>
Line 2: Total receipts this period (page 3, line 12)	<u>20.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>1128.56</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>314.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>814.56</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>Cape Cod 5</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: _____ (Treasurer's signature)

Date: 10/27/25

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: 10/27/25

27 OCT '25 PM1:11
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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]

Page 3

[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.*

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

314.00

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

~~_____~~

Line 15: TOTAL EXPENDITURES IN THE PERIOD

314.50

27 OCT '25 PM1:11
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[illegible]

0

27 OCT '25 PM1:11
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[illegible]

