

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report Municipal Form MY OF WALT

Office of Campaign and Political Finance

CLERK'S OFFICE

| Commonwealth of Massachusetts | | | | | | 202 | 22 JAN 20 th: City or Town | ÅM : | 16 |
|--|--|--|--|-------------------------------|-----------------------------------|-----------------------------------|---------------------------------|-------------------------------------|----------------------------------|
| Fill in Repor | rting Period d | lates: Beginn | ing Date: [2- | 31 - a | 0 0 En | nding Date: | 7 # 2 = 3 | 1-21 | |
| Type of Rep | ort: (Check | one) | | | | | The Land | V L U | |
| 8th day pre | eceding prelimin | ary 8th day pro | eceding election [| 30 day | after elec | tion 🔀 | year-end repo | rt 🗌 dis | ssolution |
| 282 | uneilov Office Fore addrek | Full Name (if applicable) Ward Sought and District, sidential Address MSN.Co. 413-4111 | 1 ct | | | Name of C Harring Committee | nmittee Name | rer Kd. | |
| | | SUMM | ARY BALANCI | E INFO | RMATI | ON: | | | |
| | Line 1: Endi | ing Balance from pre | evious report | | | 991. | . 28 | | |
| | Line 2: Tota | l receipts this period | l (page 3, line 11) | | | 0 | | | - |
| | Line 3: Subt | total (line 1 plus line | 2) | | | 991. | 28 | | |
| | Line 4: Tota | l expenditures this p | eriod (page 5, line | : 14) | 19 | 12.00 | Benk fo | درن | |
| | Line 5: Endi | ing Balance (line 3 n | ninus line 4) | | | 691. | 28 | | |
| | Line 6: Tota | l in-kind contributio | ns this period (pag | ge 6) | | | | | |
| - | Line 7: Tota | l (all) outstanding lia | abilities (page 7) | | | | | | |
| | Line 8: Nam | ne of bank(s) used: | Bank | of | Ame. | rica | | | |
| activity, including a finance activity of a Signed under the p | e examined this repo all contributions, los all persons acting us penalties of perjur | 1/ | disbursements, in-kind co alf of this committee in a Radin | ontributions a ccordance w | and liabilities ith the requir | for this reporting | ng period and rep .L. c. 55. | t of all campai presents the can | mpaign |
| Candidate wi | ith Committee have examined this persons acting unde | SONLY: Affidavit of O report including attached so er the authority or on behalf any expenditures on my beh | chedules and it is, to the b | pest of my kn | the requirem | nents of M.G.L. | c. 55. I have not | ement of all ca received any | mpaign finance contributions, |
| I certify that I finance activity | ty, including contrib | report including attached so outions, loans, receipts, expe ersons acting under the auth | nditures, disbursements, i | in-kind contr | ributions and | liabilities for th | nis reporting perio | od and represe | mpaign nts the |

SCHEDULE A: RECEIPTS (continued)

| Date Received | Name and Residential Address (alphabetical listing required) | Amount | Occupation & Employer (for contributions of \$200 or more) | | |
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| Line 9: Total Rec | eipts over \$50 (or listed above) | | | | |
| Line 10: Total Re | ceipts \$50 and under* (not listed above) | | | | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | | 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 (continued)

| To Whom Paid | | | | | | |
|--|---------------------------------------|--------------------------------|------------------------------------|----------|--|--|
| Date Paid | (alphabetical listing) | Address | Purpose of Expenditure | Amount | | |
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| <u> </u> | J L | Line 12: Expenditures over \$5 | 50 (or listed above) | | | |
| | | Line 13: Expenditures \$50 and | | | | |
| Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD | | | | | | |
| | Enter on page 1, line $4 \rightarrow$ | | should include only those expendit | | | |

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

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 |
|---------------|---------------------------|------------------------|------------------------|--------|
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| | Enter on page 1, line 7 → | Line 18: TOTAL OUTSTAN | DING LIABILITIES (ALL) | |