

Form CPF M 102: Campaign Finance Reporterk Municipal Form

Office of Campaign and Political Finance

OCT 2 5 2021

	Received File with: City or Town Clerk or Election Commissio
Fill in Reporting Period dates: Beginning Date:	Ending Date: io/18/Z/
Type of Report: (Check one)	
8th day preceding preliminary Sth day preceding election	30 day after election year-end report dissolution
Patrick J. O'Dn-in Candidate Full Name (if applicable) Candillar-at-(are Office Sought and District Willmann Residential Address E-mail: Patrick 0 248 B) Smail, Com Phone # (optional): 781-891-5279	Phone #(optional): 781-999-7542
SUMMARY BALANCE	INFORMATION:
Line 1: Ending Balance from previous report	1768,71
Line 2: Total receipts this period (page 3, line 11)	1200
Line 3: Subtotal (line 1 plus line 2)	2568,71
Line 4: Total expenditures this period (page 5, line 1	14) \$355,67
Line 5: Ending Balance (line 3 minus line 4)	213.04
Line 6: Total in-kind contributions this period (page	e 6) \mathcal{O}
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: Rocle	and Trust
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of a activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions, loans, receipts, expenditures, disbursements, in-kind contributions, or a contribution of all persons acting under the authority or on behalf of this committee in according to the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box of	cordance with the requirements of M.G.L. c. 55. (Treasurer's signature) (Treasurer's signature) (Treasurer's signature)
Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the bes activity, of all persons acting under the authority or on behalf of this committee in according incurred any liabilities nor made any expenditures on my behalf during this reporting per	rdance with the requirements of M.G.L. c. 55. I have not received any contributions, criod.
Candidate without Committee OR Candidate with independent activity filing separ I certify that I have examined this report including attached schedules and it is, to the best finance activity, including contributions, loans, receipts, expenditures, disbursements, incampaign finance activity of all persons acting under the authority or on behalf of this co	est of my knowledge and belief, a true and complete statement of all campaign n-kind contributions and liabilities for this reporting period and represents the

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(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.)

Name and Residential Address Occupation & Employer					
Date Received	(alphabetical listing required) Amount		(for contributions of \$200 or more)		
8/30/21	John Lawn Wututu 20 Pilsnin Rd Gay72	n at or			
A21	MA & No. NAW England Laborers' DiAwet	500	Calor Union		
	Connail - 7 (abovers Way Haplanton 01748				
	U				
10/14/21	Jin & Rosie O'Donin 8Wall St, Alington 02476	100			
5/26/21 #20210521	Gast Jame Marter 79 Pro-sut St Waltham MAX 453	10			
5/13/21	Chas Tollo	100			
5/13/21	9 Dalc St Wal 0245] My chall Tullo 7 Dalc St Wal 02457	100	•.		
Line 9: Total Recei	ipts over \$50 (or listed above)	£1,000			
Line 10: Total Rece	eipts \$50 and under* (not listed above)				
Line 11: TOTAL I	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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8/20/21	Basar 14 Fortunder	, 50	
	02457		
10/21	Tot Ch Chra 11 Kenmon Terr	82)	
	Waltham MA 02457		
1921	Rank Lopm 109 Taylor St	50	
	Waltham MA 02457		
F/4/S1	John & Denice Znype 12 A15-emade Ted 02457	50	
	02457		
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Recei	pts \$50 and under* (not listed above)	2 (10	
	ECEIPTS IN THE PERIOD	7000	← Enter on page 1, line 2 d include only those receipts not itemized above

^{*} 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

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

eport all expenditures. Please include your committee name and a page number on each page.)				
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
2/28/21	Delmont Frinting Co	Y & Pinghton St Relmont, MA 03478	flyer	1,050
36461	/(((tax flyer.	65.67
9/10/21	Wagne	28 Ellison Park Walturm MA	Clyns	990
		02452		
00/21	Wal Grund	Waltham MA		250
		02452		
		Line 12: Total Expenditures over	er \$50 (or listed above)	2355.6
		Line 13: Total Expenditures \$50	and under* (not listed above)	
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD 2355.6				

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 above.

SCHEDULE B: EXPENDITURES (continued)

D / D · I	To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
	\				
		Line 12: Expenditures over \$50	(or listed above)		
, (Line 13: Expenditures \$50 and un			
	Enter on page 1 line $A \rightarrow$	Line 14: TOTAL EXPENDITU	IRES IN THE PEDION	28.55.6	
If you have item	ized expenditures of \$50 and under,			84.25.6	

^{*} 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 C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 6 on page 1.

Date Received	From Whom Received*	Residential Address /	Description of Contribution	Value	
		Line 15: In-Kind Contributions	s over \$50 (or listed above)		
		Line 16: In-Kind Contributions			
		Line 17: TOTAL IN-KIND C			

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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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 OUTSTAND	ING LIABILITIES (ALL)	