

## Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

14 MAY 12 AM 9:51

				71	7
ъ.	ITI	13/	0	H 1	- 1

City or Town Clerk or Election Commission

Fill in dates: Month Date Year Reporting Period Beginning	Month Date Year Ending
Type of report: (Check one)  ☐ 8th day preceding preliminary ☐ 8th day preceding election ☐	□30 day after election □year-end report □dissolution
Tma R. Allen	
Full Name of Candidate (if applicable)	Committee Name
Office Sought and District Sholan Code	Name of Committee Treasurer
Residential Address 978, 263.5439	Committee Mailing Address
Tel. No. (optional)	Tel. No. (optional)
CYIMMA DV DAY A NOVE	TATEODAY
SUMMARY BALANCE Line 1: Ending balance from previous	
Line 2: Total receipts this period (page	
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this perio	\$
Line 5: Ending balance (line 3 minus line 4	
Line 6: Total in-kind contributions this	period (page 4) \$
Line 7: Total (all) outstanding liabilitie	S (page 4)
Line 8: Name of bank(s) used	
Entify that I have examined this report including attached schedules and it is, to appaign finance activity, including all contributions, loans, receipts, expenditures, represents the campaign finance activity of all persons acting under the authority. Signed under the penalties of perjudices.	disbursements, in-kind contributions and liabilities for this reporting perity or on behalf of this committee in accordance with the requirements
easurer's signature (in ink)	Date
FOR CANDIDATE FILINGS ONLY: (	CANDIDATE MUST SIGN BELOW)
fidavit of Candidate: (check 1 box only)  Candidate with Committee and no activity independent of the committee	the best of my knowledge and belief, a true and complete statement of a
property that I have examined this report including attached schedules and it is, to appaign finance activity, of all persons acting under the authority or on behalf over not received any contributions, incurred any liabilities nor made any expenditure. Candidate without Committee OR Candidate with independent activity filing erifiy that I have examined this report including attached schedules and it is, to appaign finance activity, including contributions, loans, receipts, expenditures, dia represents the campaign finance activity of all persons acting under the authoric G.L. c. 55.  Signed under the penalties of pe	res on my behalf during this reporting period.  g separate report  the best of my knowledge and belief, a true and complete statement of a subursements, in-kind contributions and liabilities for this reporting period ty or on behalf of this committee in accordance with the requirements.

Date

#### 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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Received	Name and Residential Address (alphabetical listing required)	Amou	ınt	Occupation & Employer (for contributions of \$200 or more)
			٠	
		, 8		
				i.
	Total receipts in excess of \$50 (or listed above)			
	Total receipts \$50 and under* (not listed above)			
	TOTAL RECEIPTS IN THE PERIOD	19		Enter on page 1, line 2

<sup>\*</sup> 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.

This page may be copied if additional pages are required to report 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	Amoun
	i.			
	9			
				•
			Expenditures over \$50	
Ent	ter on page 1, line 4		Expenditures \$50 and under*  TOTAL EXPENDITURES	95

<sup>\*</sup>If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not Page 3

### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

lease itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added gether from the committee's records and included in line 16.

Date Received	From Whom Received*	Residentia	l Address	Description of Contribution	Value
			i garbera d		2342 1
	•				
· .					
	Enter on page 1, line 6			In-kind \$50 and under  Total In-kind	0

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 ddress of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and mployer.

### SCHEDULE D: LIABILITIES

A.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as hose liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
			·	
	:		\$	
	1			
				1
	Enter on page 1, line 7	Line 18: OUTSTANDING LI	IABILITIES (ALL)	0

his page may be copied if additional pages are required to report all activity. Please include your committee name and a page number n each page.

Page 4



# Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

RECEIVED HARVARD TOWN CLERK

14 JAN 21 AM 9: 59

Ci

Candidate signature (in ink)

e with:  ty or Town Clerk or Election Commission Please print or type all information, excep	ot signatures.
Fill in dates:  Reporting Period Beginning 1 Date Year  End	Ing Date Year
Type of report: (Check one)  ☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day at	ter election Dyear-end report Ddissolution
Janet A. Vellande	
Full Name of Candidate (if applicable)  Town Clerk	Committee Name
	Name of Committee Treasurer
Residential Address	Committee Mailing Address
Tel. No. (optional)	Tel. No. (optional)
SUMMARY BALANCE INFOR	MATION:
Line 1: Ending balance from previous repo	rt \$ O
Line 2: Total receipts this period (page 2, line 1)	\$ 0
Line 3: Subtotal (line 1 plus line 2)	\$
Line 4: Total expenditures this period (page 3	, line 14) \$
Line 5: Ending balance (line 3 minus line 4)	\$
Line 6: Total in-kind contributions this period	(page 4) <b>\$</b>
Line 7: Total (all) outstanding liabilities (page 4)	\$
Line 8: Name of bank(s) used	
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best of a campaign finance activity, including all contributions, loans, receipts, expenditures, disbursement and represents the campaign finance activity of all persons acting under the authority or on belong. Signed under the penalties of perjury:	te in-kind contributions and lightlift - f. at the state of the state
Treasurer's signature (in ink)	Date
FOR CANDIDATE FILINGS ONLY: (CANDIDAT	TE MUST SIGN BELOW)
Affidavit of Candidate: (check 1 box only)  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 best of r campaign finance activity, of all persons acting under the authority or on behalf of this comm have not received any contributions, incurred any liabilities nor made any expenditures on my be and and activity filing separate real certify that I have examined this report including attached schedules and it is, to the best of r campaign finance activity, including contributions, loans, receipts, expenditures, disbursements and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee.  Signed under the penalties of perjury:	nittee in accordance with the requirements of M.G.L. c. 55. I half during this reporting period.  eport  ny knowledge and belief, a true and complete statement of all

### 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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Received	Name and Residential Address (alphabetical listing required)	Amo	unt	Occupation & Employer (for contributions of \$200 or more)
		•		
	Total receipts in excess of \$50 (or listed above)			
Line 10	: Total receipts \$50 and under* (not listed above)			
	TOTAL RECEIPTS IN THE PERIOD	/		Enter on page 1, line 2

<sup>\*</sup> 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.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amo	unt
			Expenditures over \$50		/
T	Enter on page 1, line 4		Expenditures \$50 and under*  TOTAL EXPENDITURES		

<sup>\*</sup>If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 3

### 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 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: I	n-kind over \$50	
		Line 16: I	n-kind \$50 and under	
	Enter on page 1, line 6	Line 17: 7	Total In-kind	

<sup>\*</sup> 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.

### 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
				×
E	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number Page 4 on each page.