

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

RECEIVED TOWN CLERK

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	Ending Date: 2021 JUL 16 P 3: 02
Type of Report: (Check one)	☐ 30 day after election ☐ year-end reportS S☐ dissolution
8th day preceding preliminary 8th day preceding election	30 day after election year-end reports dissolution
Cameron Candidate Futi Namonif applicable) Select Board Office Sought and District 29 Holiday Residential Address E-mail: Cdurant 0711 Camail. Com	Committee to Elect Corneron Dorant Committee Name Corneron Dorant Name of Committee Treasurer 29 Holiday Dr. Committee Mailing Address E-mail: Calvan + 0711 Commit
Phone # (optional): (508) 264 - 1557	Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
	JE IN ORMATION
Line 1: Ending Balance from previous report	NIA
Line 2: Total receipts this period (page 3, line 11	9300
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, lin	
Line 5: Ending Balance (line 3 minus line 4)	- 982.60 paid by randidate
Line 6: Total in-kind contributions this period (p	page 6)
Line 7: Total (all) outstanding liabilities (page 7))
Line 8: Name of bank(s) used: New Bed For	rd Credit Union
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-kin finance activity of all persons acting under the authority or on behalf of this committee. Signed under the penalties of perjury:	est of my knowledge and belief, a true and complete statement of all campaign finance id contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 7/12/2
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1	box only)
Candidate with Committee	the best of my knowledge and belief, a true and complete statement of all campaign finance, accordance with the requirements of M.G.L. c. 55. I have not received any contributions.
Candidate without Committee	the best of my knowledge and belief, a true and complete statement of all campaign ents, in-kind contributions and liabilities for this reporting period and represents the finis candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the negatives of perjury:	(Candidate's signature) Date: 7/12/2/

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. Committees must be receipts over \$50. In addition year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and application and applications and applications and applications and applications and applications are considered accounts. occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule 4.7"

(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

- cecipis.	Please include your committee name and a pa	ge number on ea	Occupation & Employer
Date Received	Name and Residential Address (alphabetical listing required)	Amount	(for contributions of \$200 or more)
5/23	Theresa B. Perira 26011 Island Fairhaum	200	Retired
	James Kalle 91 Werden Rd Faithren	50	
_	Geoff Hanorth BO Spring St Fairhaum	106	
_	Nick Costa 53 Daniel St Fairharn	60	
	Anne Marie Chagnen 24 larch ave Fairhaven	60	
_	Sharon Risturcia 192 Balsam St Fairhaven	100	
- [Peter + Melissa Deterra 279 Mill Rd Fairhaum	100	San I wife i and recorded as any
5/29	Christopher Ciccolo 17 Balsam St Fairhaven	d 200	Consultant at Leidos
5/28	Richard Costa 3Gull Island Rd. Farkauen	#100	d minuters association 7 - English in
PROPERTY WAS CLASSES OF SAME			
	M are supplied to the last of		
ine 9: Total Rece	eipts over \$50 (or listed above)	7 contri bolor	s for # #860
ine 10: Total Rec	eipts \$50 and under* (not listed above)	#1346	
ine 11: TOTAL	RECEIPTS IN THE PERIOD	#3300	← 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.

	Name and Residential Address	r neod ounted of the	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	(tot control
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	ts over \$50 (or listed above)	Strategy 12	
ne 10: Total Receip	ts \$50 and under* (not listed above)	good front in	
	CEIPTS IN THE PERIOD	2300	Enter on page 1, line 2

Page 3

^{*} 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 tiled accounts and records of all and the added together detailed accounts and records of all expenditures, but need only itemize those over \$50 in a reporting period. Committees to ust, in alphabetical order, all expenditures over \$50 in a reporting period. Committee the second of the second of

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Places include account of the second from committee records, and reported on line 13.

report all expenditures. Please include your committee name and a page number on each page.) To Whom Paid Amount Purpose of Expenditure Address (alphabetical listing) **Date Paid** \$300 Fundraiser 5122 Mac'S Soda Bar #150 Campaign Concert Molly 718/21 O'Leary 908 Neighborhood ads News \$ 755.93 Super Cheap Yard signs 5124/2 Signs B100 Tom Kennedy Campaign 718/21 contert \$868.67 Vista print 868 bmailings 7/8/21 Ja Zajac \$100 ampaign 7/8/21 concert Alyssa B. Video + Photography Campaign photos \$ 100 611121 Line 12: Total Expenditures over \$50 (or listed above) Line 13: Total Expenditures \$50 and under* (not listed above)

* 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 4

Enter on page 1, line 4 → | Line 14: TOTAL EXPENDITURES IN THE PERIOD

3282.6

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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	411	Line 12: Expenditures ov	er \$50 (or listed above)	
			and under* (not listed above)	
			NDITURES IN THE PERIOD	328

^{*} 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 5

e Received	SCHEDULE Contributors who have made in-kind om the committee's records and in	Residential Address	Description of Contribution	S. S. S.
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		Line 15: In-Kind Con	tributions over \$50 (or listed abo	ve)
			tributions \$50 & under (not lister	
		6 → Line 17: TOTAL IN		

* 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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CPF ID #:	
	(For Office Use Only)

D103 10/14



Form CPF D103: Appointment of Depository Bank

Office of Campaign and Political Finance

Commonwealth of Massachusetts				KELE	
File with: Director Office of Campaign and	d Political Finance Room 411, Boston, MA	02108			7) 979-8300 / (800) 462-OCPF ocpf@cpf.state.ma.us http://www.mass.gov/ocpf
**************************************				2021 MAY 1	1 /
CHECK ONE:	CANDIDATES:	Candidate with Political C	Committee OR Candid	late without Political Co	
_	COMMITTEES:	Political Action Committee	ee People's Committee	State Political F	Party Committee
Committee Name:	Committee	to Flect Came	non Durrant		
Mailing Address:	29 Holiday	dr.	City / State / Zip: Fair	naven MA o	2719
Treasurer's Name:					
E-Mail:				Phone #:	
Mailing Address:			City / State / Zip:	——————————————————————————————————————	
Candidate's Name:	Camuon	Durant			
E-Mail:				Phone #:	
Mailing Address:	29 Holidan	ydr.	City / State / Zip:	rhaven	MA 02719
Office Sought/Dis		J			2500 x 2100
said financial instit	ution to submit to the R THE PENALTI	he Director, Office of Campa ES OF PERJURY: 5/10/2 Date:	n designated by me as the depoign and Political Finance, the r Signature of Treasure	eports required by M	1.G.L. Chapter 55. Date:
		ACKNOWLEDGMENT	BY FINANCIAL INSTITUT	ION	
The financial instite and/or committee a	ution hereby acknown and agrees to file care that the account ma	titution is authorized to transa wledges that it has been desig mpaign finance reports with (act business and has its main or mated as the depository for can OCPF as prescribed by M.G.L.	ffice, or a branch offi npaign funds of the al c. 55 until such time	as OCPF notifies the
(du both)	Coads		DATE ACCOUNT OPEN	ED: <u>5/</u>	10/21
Authorized employ	ee's signature	Date: 5/10/21	Financial Institution:	NBCU	
Please print name:	Gabrielle 1	Posado	Mailing Address:) Purchase S	t
Title: MSR		Phone #: 508.994.6546	city / State / Zip:	u Bedford	MA 02740
, , , , , , , , , , , , , , , , , , , 		STATEMENT OF T	REASURER / CANDIDATE		
made by or for the	at, except as otherw benefit of the comm THE PENALTIES	vise provided in M.G.L. c. 55, nittee, or candidate, shall be n	, ss. 9 and 19(c), all payments t nade only from funds on depos	for campaign purpose	es in excess of \$100, d depository.
Signature of Candio	date	Date:	Signature of Treasurer		Date: