

Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE OR CANDIDATE'S COMMINITIED TOWN CLERK MUNICIPAL FORM RCUD 2024 FEB 12 AM8:52

Office of Campaign and Political Finance

File with: City / Town Clerk or Election Commission

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, organization of a candidate or candidate's committee as follows:

candidate's commit	nee as follows.				
CANDIDATE:	Full Name:	lean P. Lemie	UX		
	Residential Address:	139 Balsam			
	City / State / Zip:	airhaven, MA	02719	*.	
	E-Mail Address: /en	_ /	ast. net	Phone #:	774-263-1417
	Party Affiliation:	UF Control			(If applicable)
OFFICE SOUG	HT/PURPOSE:		-		
	Title:	Select Board	1	District:	10th Bristol
	Candidate without com	nmittee (check if applicable). c or local election official.			
COMMITTEE:	Name of Committee:				
	· · · · · · · · · · · · · · · · · · ·	(The name of the comm	ittee must include the candid	late's last name)	
	Committee Mailing Address:	·		<u> </u>	
	City / State / Zip:	·	·.	Phone #:	
OFFICERS:					
Chairperson:			Treasurer*:		
Residential Address:			Residential Address:		
City / State / Zip:			City / State / Zip:		
Phone #:			Phone #:	Email:	
<u> </u>		Additional officers ms	*A public employee may n by be listed on page two.	ot serve as treasurer of any po	litical committee (see reverse).
Check applicable box	before signing:		y or instead on page two.		
or committee on their keeping detailed acco	behalf; 3) am subject to cert	nt to this filing; 2) understand tain duties and liabilities undo aign finance activity for a per y behalf.	er M.G.L. c. 55, including	the timely filing of campa	aign finance reports and
account or committee subject to certain dutie	on their behalf; 3) acknowle es and liabilities under M.G.	asent to this filing; 2) understanding if I become a public empth. L. c. 55 including the timely ears from the date of the relevant	oloyee I must organize a of filing of campaign finance	committee and may not ser	ve as treasurer; and 4) am illed accounts and records of
SIGNED UNDER TH	IE PENALTIES OF PERJUI	RY: fluy	ome of		_ Date: <u>2 - 12 - 24</u>
that: 1) I am subject to and records of all cam	o certain duties and liabilities apaign finance activity for a p loyee, I must resign this posi	re-named committee. I affirm s under M.G.L. c. 55, including period of six years from the dition and notify OCPF of my	ng the timely filing of car late of the relevant election	mpaign finance reports and on; 2) if after my acceptance	keeping detailed accounts e of this office I become an
SIGNED UNDER TH	IE PENALTIES OF PERJUI	RY: Treasurer's signatur	re		Date:
hereby accept the of	fice of Chairperson of the ab	-			
יוראובה וואוהפי מיוי	TE DENIALTIES OF DED ILL	DV.			Date:

Chairperson's signature

ADDITIONAL OFFICERS: Other Officer/Title: Residential Address: City / State / Zip: Phone #: Other Officer/Title: Residential Address: City / State / Zip: Phone #:

DEFINITION OF A PUBLIC EMPLOYEE

M.G.L. Chapter 55, Section 13 states that a person who is employed for compensation by the Commonwealth or any county, city or town (other than an elected official) may not directly or indirectly solicit or receive political contributions. Such persons may not serve as treasurers of any political committee. If you are unsure of your status, please contact OCPF for further guidance.

SELECTED EXTRACTS FROM M.G.L.C. 55

Section 1 defines a candidate's committee:

"Candidate's committee", the political committee organized on behalf of a candidate The term "candidate's committee" shall also apply to the campaign fund of a candidate who has not organized a political committee for the purpose of carrying out the election campaign of such candidate or who receives contributions or makes expenditures independently of said committee.

Section 2 requires candidates to keep certain records:

Every candidate shall keep detailed accounts of all contributions received by him, or by a person acting on his behalf and of all expenditures made by him, or by a person acting on his behalf. Said accounts may be kept by an agent duly authorized thereto, but the candidate shall be responsible for said accounts, which shall be kept separate and distinct from all other accounts and shall include contributions made by the candidate The candidate shall preserve all receipted bills and accounts relative to all contributions received, expenditures made and any other campaign finance activity. ... The candidate shall preserve said receipted bills and accounts for six years from the date of the relevant election....

<u>Section 3</u> requires the director to:

"assess a civil penalty for any [late filed] report ... of twenty-five dollars (\$25) per day [up to \$5,000 per report]. In the case of failure to file by a candidate or a candidate's committee, the civil penalty shall be assessed against the candidate

<u>Section 5</u> outlines statements of organization of political committees:

Each political committee shall organize by filing with the director or, if organized for the purpose of a city or town election only, with the city or town clerk, a statement of organization.

The statement of organization shall include: (1) the full name of the political committee, which, if organized on behalf of a candidate, shall include the name of the candidate in said name; (2) the address of the political committee; (3) a statement of the purpose for which the political committee is organized (4) the name and residential address of the chairman and the treasurer; (5) the name, residential address, and position of other principal officers, including officers and members of the finance committee, if any, and; (6) the name and address, if known, and party affiliation of each candidate the political committee is supporting; provided, however, that if a candidate is nominated without reference to a political party, the name of his political party shall not be required

Any change in information previously submitted in a statement of organization shall be reported to the director, or if organized for the purpose of a city or town election only, to the city or town clerk, within ten days following the change.

Each political committee shall have a treasurer who shall qualify for his office by filing a written acceptance thereof with the director, or if organized for the purpose of a city or town election only, with the city or town clerk. Said treasurer shall remain subject to all the duties and liabilities imposed by this chapter until his written resignation of the office is received or his successor's written acceptance is filed as aforesaid. No person acting under the authority of, or on behalf of, any political committee shall receive any money or anything of value, or expend or disburse the same, or incur expenses while it has no treasurer qualified as aforesaid

Each treasurer of a political committee shall keep and preserve detailed accounts, vouchers and receipts as prescribed for a candidate by the provisions of section two. Each treasurer of a political committee shall keep said records for a period of six years following the date of the relevant election

No expenditure shall be made for, or on behalf of, a political committee without the authorization of the chairman or treasurer, or their designated agents

All funds of a political committee shall be kept separate from any personal funds of officers, members or associates of such committee

IMPORTANT: M.G.L. c. 55, s. 5 requires that any changes in the information provided on this form shall be filed within ten (10) days of said change. Further information can be obtained from OCPF by phone at (617) 979-8300, via e-mail at ocpf@mass.gov or on the web at www.ocpf.us





Form CPF M109: Statement of Municipal Candidate Not Raising or Expending Campaign Funds

Office of Campaign and Political Finance

File with: Local Election Official (City or Town Clerk)

Candidate's Name:	Jean P Lemieux	
Office Sought:	Select Board	:
Residential Address:	131 Balsam St.	
City / State / Zip:	Fairhaven, MA 02719	
E-Mail Address:	1em 10 jp @comeast. Phone Number:	774-263-1417

I hereby certify that I have not opened a campaign bank account for campaign funds because I do not intend to accept contributions or in-kind contributions, make expenditures, including expenditures of my own funds, or incur liabilities for any campaign-related purpose, nor do I currently have any outstanding liabilities for prior campaign-related activity. I submit the following as my campaign report for all bank reporting periods in this calendar year as provided for in Chapter 55 of the Massachusetts General Laws:

1.	Ending balance from previous report	ZERO
2.	Total receipts for reporting period	ZERO
3.	Subtotal	ZERO
4.	Total Expenditures for reporting period	ZERO
5.	Ending balance	ZERO

After filing this statement, if I decide to raise, accept, or expend funds, or incur liabilities, for a campaign-related purpose, I will immediately notify my local election official in writing, and will file periodic campaign finance reports according to the statutory filing schedule.

Until such notice is on file with the local election official, I certify that the above Zero report will be in effect for each reporting period, in the calendar year in which it is filed, required by Chapter 55 of the Massachusetts General Laws.

This form is valid through December 31 of the year in which it was signed.

SIGNED UNDER THE PENALTIES OF PERJURY:

Date: 2-12-24

INSTRUCTIONS FOR COMPLETING FORM CPF M109

This form is filed by a candidate who only files with their local election official, if:

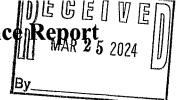
- 1. The candidate has not received any contributions;
- 2. The candidate has not made any expenditures; including with their own funds or personal credit cards;
- 3. The candidate has not incurred any obligations (liabilities);
- 4. The candidate does not have a campaign fund in existence; and
- 5. The candidate does not have a political committee.

Municipal candidates who file with OCPF, including mayoral candidates, and city council candidates in cities with populations of more than 65,000, are not eligible to submit this form to their local election official.

For assistance, please contact the Office of Campaign and Political Finance at (617) 979-8300 or by e-mail at ocpf@mass.gov



Form CPF M 102: Campaign Finance **Municipal Form**



X4100 /10/0/

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 2-20-24 Ending Date: 3-22-24						
Type of Report: (Check one)						
8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution						
Candidate Full Name (if applicable) Candidate Full Name (if applicable) Committee Name Committee Treasurer Parameter Name of Committee Treasurer Residential Address Committee Mailing Address						
E-mail: Lemiospe Concast. Net E-mail:						
Phone #:						
SUMMARY BALANCE INFORMATION:						
Line 1: Ending Balance from previous report						
Line 2: Total receipts this period (page 3, line 12)						
Line 3: Subtotal (line 1 plus line 2)						
Line 4: Total expenditures this period (page 5, line 15)						
Line 5: Ending Balance (line 3 minus line 4)						
Line 6: Total in-kind contributions this period (page 6, line 18)						
Line 7: Total (all) outstanding liabilities (page 7, line 19)						
Line 8: Total out-of-pocket expenses this period (page 8, line 22)						
Line 9: Name of bank(s) used: TFCU/Tounton Faderal Credit Union						
Affidavit of Committee Treasurer: It 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 tehalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: (Treasurer's signature) Date: 2 20 24						
FOR CANDIDATE FILINGS QNLY: 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.						
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 periury: Left M. D. 194						

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)
1/1			
		<u> </u>	
			,,,
e 9: Total Receipt	ts over \$50 (or listed above)		
e 10: Total Receip	ots \$50 and under* (not listed above)		
<u> </u>			
	ECEIPTS IN THE PERIOD		Enter on page 1, line 2

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address	Amount	Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
2-12-24	11 Heningway Dr. Riverside St.	\$500	PileSiller Local #57
	02918		
Line 10: Total Recei	ipts over \$50 (or listed above)		* If you have itemized receipts of \$50 and
Line 10: Total Receipts over \$50 (or listed above) Line 11: Total Receipts \$50 and under (not listed above)			under, include them in line 10. Line 11 should include only those receipts not itemized above.
Line 12: TOTAL RECEIPTS IN THE PERIOD Enter on page 1, line 2			

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
El 15 20	Dr. Don's Buttons of more	3906 W Motion DP Glenda leg az.	Sign Set up	#25
100 12, 200			5.9.1 50.7.4	
2-17-24	SPBUTTONS ONline Dr. Don's Button's & More	3906 W MOTION Dr. Glendale AZ	Sign S	#449
2-12-24	Fairhaven Neighborhood news	166 Dogwood 3+ Faithavan Ma	advertisment	#107
				4 ~ 00
,				#531.00
			<u> </u>	10/

SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid	T		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
				·
·				
-				
		·		
			·	
* If you have	itemized expenditures of \$50	Line 13: Expenditures over \$50 (or listed above)		\$500
and under, include them in line 13. Line 14 should include only those expenditures not itemized above.		Line 14: Expenditures \$50 and under (not listed above)		
		Line 15, TOTAL EVDENDITE	IIDEC IN THE DEDIAN	A MA
	Enter on page 1, line $4 \rightarrow$	Line 15: TOTAL EXPENDIT	UKES IN THE FERIUD	MINU

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

A.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and ecords of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions eceived. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all receipts. Please

ude the candidate or committee name and a-page number on each additional page.				
Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
				-
		· ·		
·				
4.70				
* If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.		Line 16: In-Kind Contributions ov		
		Line 17: In-Kind Contributions \$5	9	
		Line 18: TOTAL IN-KIND CONTRIBUTIONS IN THE PERIOD		

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and the outstanding balance, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	Faither Newhorked	166 Desweed 3+ Faither Ma 0719		\$107
2-12-24	Faither Neighborhood	Fairhaver Ma eJM	Advertisment_	PICC
				48100

Enter on page 1, line 7 \rightarrow Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)

SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

	Name and Address of Vendor		The state of the s
Date Paid	(alphabetical listing required)	Amount	Purpose of Expenditure
	<u>for</u>	1	
			39
Line 20: Total Itemize (or listed above)	ed Out-Of-Pocket Expenditures Over \$50	#474.00	* If you have out-of-pocket expenses of \$50
Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and under (not listed above)			and under, include them in line 20. Line 21 should include only those expenditures not itemized above.
Line 22: TOTAL OUT-	OF-POCKET EXPENDITURES IN THE PERIOD	\$474.00	← Enter on page 1, line 8

SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

	Name and Address of Vendor		Purpose of Expenditure
Date Paid	(alphabetical listing required)	Amount	r m hose or exhemotoric
2-12-24	Fairhaver Noi ephothood 166 Dogwood st	481	Advertisem on T
0 10 24	166 Degisland St	9101	
			Add to the second secon
Line 20: Total Itemiz (or listed above)	ed Out-Of-Pocket Expenditures Over \$50	\$81	* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21
	nized Out-Of-Pocket Expenditures \$50 and	# /	should include only those expenditures not itemized above.

Enter on page 1, line 8

Page 8

Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD



Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report

Municipal Form

FATEHAUEN TOWN CLERY RCUD 2024 APR 25 AM8:37

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission **Ending Date:** Fill in Reporting Period dates: Beginning Date: Type of Report: (Check one) 30 day after election year-end report dissolution 8th day preceding preliminary 8th day preceding election Committee Name Name of Committee Treasurer Committee Mailing Address E-mail: Phone # : **SUMMARY BALANCE INFORMATION:** Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 12) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 15) Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 6, line 18) Line 7: Total (all) outstanding liabilities (page 7, line 19) Line 8: Total out-of-pocket expenses this period (page 8, line 22) Line 9: Name of bank(s) used: Affidavit of Committee Treasurer: 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. (Treasurer's signature) Signed under the penalties of perjury: 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 dutherity or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55. (Candidate's signature)

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	
Date Heterived	(arphaeocian monag require)			
		1.		
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<u>. </u>				
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L				
	.			
ne 9: Total Receipt	s over \$50 (or listed above)			
ne 10: Total Receip	ts \$50 and under* (not listed above)			
ne 11: TOTAL RE	CEIPTS IN THE PERIOD	A	← Enter on page 1, line 2	
	<u> </u>		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)
ne 10: Total Receipts	s over \$50 (or listed above)		* If you have itemized receipts of \$50 and under, include them in line 10. Line 11
ne 11: Total Receipts	s \$50 and under (not listed above)		should include only those receipts not itemized above.
ne 12: TOTAL REC	CEIPTS IN THE PERIOD	0 +	- Enter on page 1, line 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Fall	(arphanctical listing)	Auui cos	1 ar pose or Expenditure	Ainount
L				
* If you have itemized expenditures of \$50		Line 13: Expenditures over \$50 (or listed above)	0
and under, include them in line 13. Line 14 should include only those expenditures not itemized above.		Line 14: Expenditures \$50 and under (not listed above)		
		Line 15: TOTAL EXPENDITU	DEC III WITH DEDICE	N

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

vi.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and ecords of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions eccived. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all receipts. Please

Date Received	or committee name and a-page number on From Whom Received*	Residential Address	Description of Contribution	Value
* If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.		Line 16: In-Kind Contributions ov	ver \$50 (or listed above)	
		Line 17: In-Kind Contributions \$5	50 and under (not listed above)	
		Line 18: TOTAL IN-KIND CONT	TRIBUTIONS IN THE PERIOD	0

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
	Language			
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	ING LIABILITIES (ALL)	0

- 7

SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

	Name and Address of Vendor		
Date Paid	(alphabetical listing required)	Amount	Purpose of Expenditure
Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50 (or listed above)			* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21
Line 21: Total Unitem under (not listed above	nized Out-Of-Pocket Expenditures \$50 and e)	should include only those expenditures not itemized above.	

Page 8

Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD