

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: 3	1/21/32 Ending Date: 1011 3/3/33			
Type of Report: (Check one)	FAIRHAVEN			
	MASS.			
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution			
Cathy Melanson Candidate Full Name (if applicable)	Committee to Elect Cathy J. Charles Promittee Name metanson			
Office Sought and District	Name of Committee Treasurer			
110 Hdam 5 St. Falmauen 114 Residential Address 231/6	110 Hoans St. tarn oven 11H Committee Mailing Address 127 16			
E-mail: COTHU Melangon Qunhoo COM	E-mail: Cathumelan 500 Quaha Com			
	Phone # (optional): 5/13-9/39-2289			
Phone # (optional): 507 - 979 - 2379	Phone # (optional): 30 3 - 9 3 9 - 22 3 9			
SUMMARY BALANC	CE INFORMATION:			
Line 1: Ending Balance from previous report				
Line 2: Total receipts this period (page 3, line 11)	\$2,190.00			
Line 3: Subtotal (line 1 plus line 2)	\$ 2, 190.00			
Line 4: Total expenditures this period (page 5, lin	e 14) 2, 0 \$ 2.00			
Line 5: Ending Balance (line 3 minus line 4)	108.00			
Line 6: Total in-kind contributions this period (pa	ge 6)			
Line 7: Total (all) outstanding liabilities (page 7)				
Line 8: Name of bank(s) used: Dank	5			
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 inance 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. Signed under the penalties of perjury: Date: Date:				
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 authority of on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.				
Signed under the penalties of perjury:	(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.)

	Name and Residential Address Occupation & Employer							
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)					
3/10/22	Linda Morad	50 00_						
and the second s								
Line 9: Total Rece	ipts over \$50 (or listed above)							
Line 10: Total Rece	eipts \$50 and under* (not listed above)							
	RECEIPTS IN THE PERIOD	0. Time 10 ali	Enter on page 1, line 2					

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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And the state of t			
Line 9: Total Receipt	s over \$50 (or listed above)	\$50.00	
Line 10: Total Receip	ts \$50 and under* (not listed above)	<i>\$2,140.00</i>	
,		+2,190.00	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

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 report all expenditures. Please include your committee name and a page number on each page.)

report an expens	To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
3/25	Matt Belanger			150.00	
3/25	F. Sarawa	New Bedford, MA	wine tasting	150.00	
3/25	Travelers Alehouse	III HUHIESTON AVE Fairhaven, NA	wine tasting	1,632.00	
3/25	Leah Winship	New Bedford, MA	wine tasting	150.00	
Line 12: Total Expenditures over \$50 (or listed above)			2082.00		
Line 13: Total Expenditures \$50 and under* (not listed above)			Ø		
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD				20820	

^{*} 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