

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	11 Ending Date: Fuly 21, 22
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election 30 day a	after election year-end report dissolution
Candidate Full Name (if applicable) MADICHCAS SUNDA Committee Office Sought and District 33 NASH 1940N St. Mhad Residential Address E-mail: \www.adamagno.idovd.com Phone # (optional): 79 - 70 - 8246 Phone # (optional): Phone # (optional)	Committee Name Name of Committee Treasurer Committee Mailing Address ptional):
SUMMARY BALANCE INFOR	RMATION:
Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 11)	\$1000.00
Line 3: Subtotal (line 1 plus line 2)	-+1,000,00
Line 4: Total expenditures this period (page 5, line 14)	\$ 154.70
Line 5: Ending Balance (line 3 minus line 4)	4 345.30
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: Lastern Bank	-, Marbhebead
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowle activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions a finance activity of all persons acting under the authority or on behalf of this committee in accordance wis Signed under the penalties of perjury:	and liabilities for this reporting period and represents the campaign
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 kn activity, of all persons acting under the authority or on behalf of this committee in accordance with incurred any liabilities nor made any expenditures on my behalf during this reporting period that are	the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the best of my kn finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions finance activity of all persons acting under the authority of an behalf of this candidate in Signed under the penalties of perjury:	ributions 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.)

Port 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)		
7/8/22	Paul E. Zayott	P100-	Retired		
Line 9: Total Rece	ipts over \$50 (or listed above)				
Line 10: Total Reco	eipts \$50 and under* (not listed above)				
	RECEIPTS IN THE PERIOD	41,000,	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)
3/12/2	Samo Grave		
المبار المبار	- fund space		
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD	← Enter on page 1, line 2 Id include only those receipts not itemized above.	

Page 3

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

To Whom Paid Date Paid (alphabetical listing) Address Purpose of Expenditure Amount				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
				L
	I			
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Diffe 15.1 10 to 15.1 10 to 15.1 10.1 10.1 10.1 10.1 10.1 10.1 10.1				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				

^{*} 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

SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
				L	
	Line 12: Expenditures over \$50 (or listed above)				
Line 13: Expenditures \$50 and under* (not listed above)					
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD					
		r include them in line 12. Line 13 s		12 3 4	

^{*} 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

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 on page 1.

	71 TA 1 14	Davida-Alal Adduses	Description of Contribution	Value
Date Received	From Whom Received*	Residential Address	Description of Contribution	y aluc
	Line 15: In-Kind Contributions over \$50 (or listed above)			
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

^{*} 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.

Page 6

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
3/13/22	Square Spule	NYC	Nuebsite	20-
4/11/20		NYE	27	20-
5/11/22	n	V	ш	158,92
4/5/22	- Vistape Int	Lexington Me	BIZ CARds	38.45
3/24/2	Signs-on-theches	p Austin TX	51915	391.50
4/11/22	Trader Soe's	Andover, MA	Bood & Beverage	55.57
				17
			14	
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				654,70