

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

OI IVIASSACIJUSEUS	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	15/22 Ending Date: June 19,2021
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election 30	day after election year-end report dissolution
La ca Tampario	
Candidate Full Name (if applicable)	Committee Name
MAGBLEHEAD SCHOOL COMMITTEE	
Office Sough, and District	Name of Committee Treasurer
Residential Address	Committee Mailing Address
E-mail: Laura tamagno Qiclo d. rome-ma	-
	ue # (optional):
SUMMARY BALANCE IN	FORMATION:
Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 11)	61,000.00
Line 3: Subtotal (line 1 plus line 2)	\$1000.00
Line 4: Total expenditures this period (page 5, line 14)	654.70
Line 5: Ending Balance (line 3 minus line 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: Enstern Bank	Mibered
Affidavit of Committee Treasurer:	
I certify that I have examined this report including attached schedules and it is, to the best of my k activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contribut finance activity of all persons acting under the authority or on behalf of this committee in accordance.	tions and liabilities for this reporting period and represents the campaign
Signed under the penalties of perjury:	(Treasurer's signature) Date:
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 activity, of all persons acting under the authority or on behalf of this committee in accordance incurred any liabilities nor made any expenditures on my behalf during this reporting period to	e with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee    Candidate without Committee   Candidate without Committee     C	my knowledge and helief a true and complete statement of all campaign
finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind campaign finance activity of all persons acting under the authority or on behalf of this candid	contributions and liabilities for this reporting period and represents the
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Date: AUV 9 30
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.)

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)			
4/8/22	PAUL E. Zayotti	£1,000				
	,					
Line 9: Total Rece	ipts over \$50 (or listed above)					
	ripts \$50 and under* (not listed above)	27.0				
	RECEIPTS IN THE PERIOD	1,000	← Enter on page 1, line 2 d 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)
ine 9: Total Receir	ots over \$50 (or listed above)		
	pts \$50 and under* (not listed above)		
	ECEIPTS 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.

(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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date I alu	(aiphabeticai listing)	7 Audi CSS	Turpose of Expenditure	
			.	
				L
		10 70 10	Φ50 / 11 · 1 · 1	
		Line 12: Total Expenditures	s over \$50 (or listed above)	
		Line 13: Total Expenditures	\$50 and under* (not listed above)	
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENI	DITURES IN THE PERIOD	

<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.

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### **SCHEDULE B: EXPENDITURES (continued)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	(mp.mserren issuag)			
-				
		Line 12: Expenditures over \$5	0 (or listed above)	
		Line 13: Expenditures \$50 and		
	Enter on page 1, line 4 →		FURES IN THE PERIOD should include only those expenditure	

<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.

#### 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		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 $6 \rightarrow$	Line 17: TOTAL IN-KIND CONTRIBUTIONS		

<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.

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# 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.

as those liabilities incurred during this reporting period.					
Date Incurred	To Whom Due	Address	Purpose	Amount	
3   13/22	Square space	8 CLARKSON St. NY	website	20.00	
4/11/22	t,	Į.	WEBSITE	20,00	
5/11/22			L1	158.96	
4/5/2		Lexington MA	Businessiands	<b>30.45</b>	
3/24/22	gigns on the Che	PAUS Ling TX	919119	391,50	
4/11/22	Thater Joe's	300 Andover St. Peabo	T Food & Beverge	55.57	
		- L	REI	·	
		MARON	A30-		
		Expin	Ro-		
				654 70	
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)					