

Form CPF M 102: Campaign Finance Report

Municipal Form TOWN CLERK Office of Campaign and Political Finance BURY, MASS

of Massac		2022 MAY 20 AM II: 56
Fill in 1	Reporting Period dates: Beginning Date:	2122 MAY 20 AH 1: 54 File with: City or Town Clerk or Election Comm 03/11/22 Ending Date: 03/28/22
Type of	f Report: (Check one)	
	lors	
	asy preceding preliminary 8th day preceding elect	ction 30 day after election year-end report dissolution
Jennifer	Roberts	
	Candidate Full Name (if applicable)	Committee to Elect Jennifer Roberts
Select Board, Sudbury, MA		Committee Name Scott Christensen
4.0.:55	Office Sought and District	Name of Committee Treasurer
4 Griffin	n Lane, Sudbury, MA 01776	14 Griffin Lane, Sudbury, MA 01776
mail:	Residential Address	Committee Mailing Address
	jsroberts25@hotmail.com	E-mail: scottlchristensen@gmail.com
one # (op	otional):	Phone # (optional):
	SIIMMADV DAT	ANCE DIFORM
		ANCE INFORMATION:
	Line 1: Ending Balance from previous report	rt 47.99
	Line 2: Total receipts this period (page 3, line	ne 11)
	Line 3: Subtotal (line 1 plus line 2)	1425.63
	Line 4: Total expenditures this period (page 5	
	Line 5: Ending Balance (line 3 minus line 4)	47.99
	Line 6: Total in-kind contributions this period	d (page 6)
	Line 7: Total (all) outstanding liabilities (page	ge 7) 0
	Line 8: Name of bank(s) used: Citizen's Bank	
ify that I h	ommittee Treasurer:	
,	persons defing under the authority of on behalf of this committee	the best of my knowledge and belief, a true and complete statement of all campaign finance which the requirements of M.G. L. o. f.
d under ti	the penalties of perjury:	and requirements of M.O.L. C. 55.
CAND	DIDATE FILINGS ONLY: Affidavit of Candidate: (check 1	(Treasurer's signature) Date: 5/20/22
andidate certify that tivity, of a	with Committee	to the best of my knowledge and belief a true and complete when a second
andidate vertify that name active	without Committee	o the best of my knowledge and belief a true and complete a true a
under the	e penalties of perjury:	D ()
		(Candidate's signature) Date: 5/20/22

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)
03/15/22	Jennifer Roberts 14 Griffin Lane Sudbury, MA 01776	126.18	Director of Marketing Wingate Wealth Advisors
03/15/22	Jennifer Roberts 14 Griffin Lane Sudbury, MA 01776	240.86	Director of Marketing Wingate Wealth Advisors
03/18/22	Jennifer Roberts 14 Griffin Lane Sudbury, MA 01776	29.00	Director of Marketing Wingate Wealth Advisors
03/19/22	Jennifer Roberts 14 Griffin Lane Sudbury, MA 01776	981.60	Director of Marketing Wingate Wealth Advisors
			÷
ne 9: Total Receipts over \$50 (or listed above)		1,377.64	
ne 10: Total Receipts \$50 and under* (not listed above)		0	t.
	EIPTS IN THE PERIOD ipts of \$50 and under, include them in line 9.	1,377.64 ←	Entor on mass 1. thus 0.

^{*} 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)
		4.5	
		, ,	
ine 9: Total Receipts	over \$50 (or listed above)		
ine 10: Total Receipts	s \$50 and under* (not listed above)		
ine 11: TOTAL REC	CEIPTS IN THE PERIOD		← Enter on page 1, line 2
f you have itemized red	ceipts of \$50 and under, include them in line 9	T : 10 1 1	1, 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

^{*} 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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
3/15/22	Vistaprint	Vistaprint Netherlands BV Hudsonweg 8 Venlo, The Netherlands 5928LW	Banner	126.
3/15/22	Vistaprint	Vistaprint Netherlands BV Hudsonweg 8 Venlo, The Netherlands 5928LW	Postcards for direct mailing	240.
3/18/22	CampaignPartner.com Data Ecology LLC	PO Box 118 Still River, MA 01467	Campaign website	29.
3/19/22	United States Postal Service	517 Boston Post Rd Sudbury, MA 01776	Stamps for direct mailing	981.6
	,			
		Line 12: Total Expenditures over	r \$50 (or listed above)	1,377.64
•		Line 13: Total Expenditures \$50	and under* (not listed above)	C
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITU	RES IN THE PERIOD	1,377.64

ou 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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	A 0 4	
	(passessess insting)	Address	1 ur pose or Expenditure	Amount	
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TO THE PART OF THE					
11					
1					
	-				
		T 10 F			
		Line 12: Expenditures over \$50	(or listed above)		
Line 13: Expenditures \$50 and under* (not listed above)					
		15. Exponditures \$50 and th	muci (not fisiou above)		
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITU	RES IN THE PERIOD		
	1	include them in line 12. Line 13 sho			

^{*} 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 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
	With the second			
	I The second sec	·		
				1100



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

			F	ile with: C	ity or Town Cler	k or Elect	ion Commission
Fill in Re	eporting Period dates: Beginning Date: 3/1	1/202	22 Ending D	ate: 4	/17/2022		
Type of I	Report: (Check one)						
8th day	y preceding preliminary 8th day preceding election	\boxtimes	30 day after election	year	r-end report	⊠ dis	ssolution
Meredith (Catherine Gerson		Meredith C. Gerson Elect	ion Comr	nittee		
	Candidate Full Name (if applicable)	-		Committ	ee Name		
Sudbury S	School Committee	_	Kathryn Knightly			·	
	Office Sought and District				nittee Treasurer		
23 Hilltop	Rd, Sudbury, MA 01776	_ :	23 Hilltop Rd, Sudbury, I				
 - 	Residential Address			mmittee Ma	ailing Address		
E-mail:		-	E-mail:				
Phone # (opt	tional):	_ 1	Phone # (optional):			- 23	
		_				<u> </u>	
	SUMMARY BALAN	CE	INFORMATION:			APR	JWN C
	I Full Deliver Community			· · · · · · · · · · · · · · · · · · ·		56) N
	Line 1: Ending Balance from previous report						75
	Line 2: Total receipts this period (page 3, line 1	1)				<i>₹</i> ₩₩	<u> </u>
	Line 2. Total recorpts this period (page 5, mie 1	-,				<u>য়</u>	> 1
	Line 3: Subtotal (line 1 plus line 2)				1	3	MASS
				- There	***************************************		
	Line 4: Total expenditures this period (page 5, 1	ine 1	4)			0	
	The Forest of Police (Control of Control of		[٦	
	Line 5: Ending Balance (line 3 minus line 4)					<u> </u>	
	Line 6: Total in-kind contributions this period (nage	6)		532.0	01	
	Zano de Toma mama dominio mono ante Person (I					亅	
	Line 7: Total (all) outstanding liabilities (page 7)				0	
						7	
	Line 8: Name of bank(s) used: TD Bank		· · · · · · · · · · · · · · · · · · ·			_	
1.00 1 to 0.0	O W B						
I certify that I	Committee Treasurer: I have examined this report including attached schedules and it is, to the be	est of n	ny knowledge and belief, a true	and compl	ete statement of	all campai	gn finance
activity, inclu	iding all contributions, loans, receipts, expenditures, disbursements, in-kin ity of all persons acting under the authority or on behalf of this committee	d contr	ributions and liabilities for this	reporting p	eriod and represe	nts the car	mpaign
	Wall - 45) [//ai/	n de	, 1		Date:	4/	24/22
	r the penalties of perjury:	2714	(Treasurer's	signature)		-//	7/200
FOR CAN	NDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1	box on	ly)				
Candida	ate with Committee			_			
I certify activity.	ate with Committee that I have examined this report including attached schedules and it is, to t of all persons acting under the authority or on behalf of this committee in	he best accord:	t of my knowledge and belief, a ance with the requirements of l	a true and com.G.L. c. 5:	omplete statemen 5. I have not rece	it of all ca cived any	contributions,
	any liabilities nor made any expenditures on my behalf during this reporti						
	ate without Committee				•		
I certify finance a	that I have examined this report including attached schedules and it is, to t activity, including contributions, loans, receipts, expenditures, disbursemen	he best its. in-l	t of my knowledge and belief, a kind contributions and liabilitie	a true and co	omplete statement porting period ar	it of all ca id represe	mpaign nts the
campaig	n finance activity of all persons acting under the authority or on behalf of	his car	ndidate in accordance with the	requiremen	ts of M.G.L. c. 5	5. /	
Signed under	r the penalties of perjury: Mudatik C'A	lev	(Candidate's	signature)	Date: 4	124	12022

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	
			1
and an annual section of the section			
-			
			1
ine 9: Total Recei	pts over \$50 (or listed above)		
			i
ine 10: Total Rece	ipts \$50 and under* (not listed above)		
ina 11. TOTAL L	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
me II. IVIAL F			bld include only those receipts not itemized above

^{*} 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)
		L	
Line 9: Total Rece	ipts over \$50 (or listed above)		
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL 1	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
* If you have itemize	I receipts of \$50 and under include them in line	e 9 Tine 10 shou	ld include only those receipts not itemized above.

^{*} 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
	Addition 1949			
	A STANDARD S			
			0.00 (11 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		Line 12: Total Expenditures ov	er \$50 (or listed above)	
		Line 13: Total Expenditures \$50) and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES 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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date I aid	(urphubereur normg)			
		Line 12: Expenditures over \$5	0 (or listed above)	
		Line 13: Expenditures \$50 and	under* (not listed above)	
	Enter on page 1, line 4 → mixed expenditures of \$50 and unde			res not itemized

^{*} 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
4/16/2022	Meredith Catherine Gerson	23 Hilltop Rd, Sudbury, MA 01776	Debt forgiveness	532.01
		Line 15: In-Kind Contribution	ns over \$50 (or listed above)	532.01
		Line 16: In-Kind Contribution	as \$50 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND	CONTRIBUTIONS calendar year, you must report the n	532.01

^{*} 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
2/9/2019	Meredith Catherine Gerson	23 Hilltop Road Sudbury, MA 01776	Domain Privacy	5
2/9/2019	Meredith Catherine Gerson	23 Hilltop Road Sudbury, MA 01776	Campaign website monthly fee	29
2/15/2019	Meredith Catherine Gerson	23 Hilltop Road Sudbury, MA 01776	Campaign signs and lawn stakes	700
3/1/2019	Meredith Catherine Gerson	23 Hilltop Road Sudbury, MA 01776	Posts for hand-held campaign signs	88.06
3/8/2019	Meredith Catherine Gerson	23 Hilltop Road Sudbury, MA 01776	Campaign website monthly fee	29
4/8/2019	Meredith Catherine Gerson	23 Hilltop Road Sudbury, MA 01776	Campaign website monthly fee	29
1/10/2022	Meredith Catherine Gerson	23 Hilltop Road Sudbury, MA 01776	Debt repayment	-348.05
4/16/2022	Meredith Catherine Gerson	23 Hilltop Road Sudbury, MA 01776	Debt foregiveness	-532.01
	,			
	Enter on page 1, line 7 -	Line 18: TOTAL OUTST	ANDING LIABILITIES (ALL)	0

Commonwealth of Massachusetts

Candidate's Name:

Form CPF S-1: Statement of Settlement

CPF ID#	•

Office of Campaign and Political Finance

(For Office Use)

File with: Director Office of Campaign and Political Finance One Ashburton Place, Room 411, Boston, MA 02108

Meredith Catherine Gerson

(617) 979-8300 / (800) 462-OCPF / Fax: (617) 727-6549 ocpf@cpf.state.ma.us www.mass.gov/ocpf

Please print or type all information, except signatures. One form should be filed for debts settled with each creditor.

Treasurer's Name: (if applicable)	Kathryn Knightly		
Committee Name:	Meredith C. Gerson Election Committee		
In settling the debts	noted below, I/we certify:		
	he candidate and/or the political committee, listed below, have been settle	ed in accordance with 970	CMR 1.03:
Date Incurred	To Whom Due	<u>Amount</u>	Date of Settlemen
	eredith Catherine Gerson	\$532.01	4/16/2022
2 At the time the li	ability was incurred, I/we intended that the candidate/committee would pa	ay in full for the goods or	services rendered.
	orations or other entities subject to M.G.L. c. 55, s. 8:	,	
5. For debts to corp	as extended in the ordinary course of business on terms similar to those gr	anted to other political an	d non-political
debtors;			
b. the candidate	e and/or political committee has/have made commercially reasonable effo	orts to satisfy the debt;	
Aleia aandida	has pursued remedies to seek payment in the manner it normally takes aga te/political committee;		
d. the settlement proposed to	nt is similar to others the creditor has made with other debtors, and simila its other creditors;	r to settlements the candid	darge omnitte shas
e. the length of	f time prior to settlement is consistent with normal business and trade prac-	ctice;	∴ ⊆
of goods or	ot the subject of a dispute between the candidate/committee and the credit services, or the amount owed; and		· 6元
c. the goods or contribution	services provided by the creditor and/or by the extension of credit were not to the candidate/committee.	not intended by the credito	or e anúfikind

- 4. For debts to individuals or other entities such as sole proprietorships, that are not subject to M.G.L. c. 55, s. 8:
 - a. the liability was settled in accordance with all the requirements of paragraph 3 (above); OR
 - b. the amount forgiven, when considered together with amounts contributed from the same individual or entity, is no more than the amount said individual or entity may contribute in accordance with the campaign finance law.

I certify that the conditions specified above apply to each listed liability.

Signed under the penalties of perjury:

Date: 4/16/2022

Candidate Signature

Treasurer Signature

asurer Signature (if applicable) Date: 4/16/2002

Date: 4)16/202 a

Creditor Signature
(authorized agent or officer)

NOTES

Who should file this form?

Any candidate or committee settling a debt for less than the amount owed. This form should be filed for the settlement of both corporate and non-corporate debts. One form should be filed for debts settled with each creditor.

When should this form be filed?

This form should be filed within 30 days of the settlement of the debt.

For further information:

Please contact the Office of Campaign and Political Finance at ocpf@cpf.state.ma.us or (617) 979-8300.



Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachuseus	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: March 11	, , , , , , , , , , , , , , , , , , , ,
Type of Report: (Check one)	
	y after election year-end report dissolution
Lisa V. Kaxhaxdjian	
Sul bus Select Board	Committee Name
30 Mendey WOK CVCP Schus	Name of Committee Treasurer
E-mail: LISO KWChaka jana grant. Com E-mail:	Committee Mailing Address
	(optional):
CHIMANA DIVIDALI ANCIE INTEG	DMATION.
SUMMARY BALANCE INFO	RVIATION:
Line 1: Ending Balance from previous report	0
Line 22 Total receipts this period (page 3, line 11)	2,830.04 \$ 50 2,830.04 \$ 50 2,830.04
Line 3: Subtotal (line 1 plus line 2)	3,830,04
Line 4: Total expenditures this period (page 5, line 14)	2,830.04 =
Line 5: Ending Balance (line 3 minus line 4)	2:0
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	
Affidavit of Committee Treasurer:	
I certify that I have examined this report including attached schedules and it is, to the best of my know 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 v	Date
Signed under the penalties of perjury:	(Treasurer's signature)
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 katherity, 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 a	h 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 left finance activity, including contributions, loans, receipts, expenditures, disbursements in-kind concampaign finance activity of all persons acting under the authority of on behalf of this candidate is	cnowledge and belief, a true and complete statement of all campaign

(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)
3/25/22	Lisa Karchardiian 30 Meddowbrockcirch	1,744.62	
3/29/22	Lisa Kouch & Kdyian 30 Madowbrook Crak Lisa Kachakdiian 30 Madowbrook Circle	485.42	
4/7/22	Lisa Kachardian 30 Meadowbrook Circle	600,00	
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	2,830.04	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)
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
Line 11: TOTAL R	ECEIPTS IN THE PERIOD	2,830.04	← 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 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	
3/25/22	Minuteman Aress Marlboro	160 Main Sheet Mariboro	Mailer	1,744,60	
3/9/22	Editle Arrangements	1025 Boskin Post Rd. East Lte 20	hank Kees	485.42	
4/1/02	Carolboughter	27 Immerst, W. Koabuy, MA	Website Update	600.00	
	: •				
	Line 12: Total Expenditures over \$50 (or listed above)				
	Line 13: Total Expenditures \$50 and under* (not listed above)				
	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				

^{*} 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)

Date Paid	To Whom Paid		D 67	
Date Faiu	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	3			
u um 1				
		Line 12: Expenditures over \$50	(or listed above)	
		The 12. Expenditules over \$50	(or fisted above)	
		Line 13: Expenditures \$50 and u	nder* (not listed above)	
	Enter on page 1. line 4 →	Line 14: TOTAL EXPENDITU	URES IN THE PERIOD	2,830,04
		include them in line 12. I ine 13 sh		<u> </u>

^{*} 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 CO	ONTRIBUTIONS	0

^{*} 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
		·		
				to speeds and so
	Enter on page 1, line 7 →			



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: 03	7/10/2022 Ending Date: 04/25/2022				
Type of Report: (Check one)					
8th day preceding preliminary 8th day preceding election	⊠ 30 day after election				
Maura Carty	Committee Name				
Candidate Full Name (if applicable) L-S School Committee	27 77				
Office Sought and District 15 Stonebrook Rd	Name of Committee Treasurer Committee Mailing Address				
Residential Address E-mail:	E-mail: Committee Mailing Address S S S S S S S S S S S S S S S S S S				
Phone # (optional):	Phone # (optional):				
SUMMARY BALAN	ICE INFORMATION:				
Line 1: Ending Balance from previous report	375.91				
Line 2: Total receipts this period (page 3, line 1	1) 0				
Line 3: Subtotal (line 1 plus line 2)	375.91				
Line 4: Total expenditures this period (page 5, l	ine 14) 76.80				
Line 5: Ending Balance (line 3 minus line 4)	452.71				
Line 6: Total in-kind contributions this period (p	page 6) 0				
Line 7: Total (all) outstanding liabilities (page 7	() O				
Line 8: Name of bank(s) used:					
Affidavit of Committee Treasurer: I certify that I have examined this report including altached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-king finance activity of all persons acting under the authority or on behalf of this committee is Signed under the penalties of perjury:	d 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)				
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 finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	he best of my knowledge and belief, a true and complete statement of all campaign its, in-kind contributions and liabilities for this reporting period and represents the his candidate in accordance with the requirements of M.C.L. a. 55				
Signed under the penalties of perjury:	(Candidate's signature) Date: 4/25/2022				

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)
]
	·		
			-
ne 9: Total Receip	ots over \$50 (or listed above)		
ne 10: Total Recei	pts \$50 and under* (not listed above)		
ne 11: TOTAL R	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2
		0 Line 10 showl	d include only those receipts not itemized above.

^{*} 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)
			(
Line 9: Total Receip	ts over \$50 (or listed above)		
Line 10: Total Receip	ots \$50 and under* (not listed above)		
Line 11: TOTAL RI	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2
If you have itemized r	againta of \$50 and under include them in line) T: 10 -11	d include only those receipts not itemized above

^{*} 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.)

D-4- D-23	To Whom Paid aid (alphabetical listing) Address Purpose of Expenditure Amoun			Amount
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	Staples	·		47.80
3/15/2022				47.80
	Campaign Partner			30.00
/6/2022				29.00
				:
				1
			-,	
`				
			·	
,				
		Line 12: Total Expenditures ov	er \$50 (or listed above)	
	·	Line 13: Total Expenditures \$50		76.80
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	76.80

SCHEDULE B: EXPENDITURES (continued)

D-4- D-id	To Whom Paid	1		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	· ·			
,				
		L 10 F .:		
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and u	under* (not listed above)	
		Line 14: TOTAL EXPENDITU	<u> </u>	
70 1		include them in line 12. Line 13 sh		

^{*} 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 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
	,			

Page 7



Form CPF M109:

TOWN CLERT.

Statement of Municipal Candidate UDBURY, MASS Not Raising or Expending Campaign Funds

Office of Campaign and Political Finance MAY -6 AM 9: 02

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

Trevor A. Haydon Candidate's Name: **Board of Assessors** Office Sought: 85 Goodman's Hill Road Residential Address: Sudbury MA 01776 City / State / Zip: 978-443-3364 megtrev@msn.com E-Mail Address: Phone Number:

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: April 26, 2022 Candidate's signature:



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

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 2	11/2022 Ending Date: 4/27/2022
The CR and (Charleson)	
Type of Report: (Check one)	(V) 30 day after election
Sth day preceding preliminary Sth day preceding election	30 day after election year-end report dissolution
Cara Endyke Dorm	Committee Name
Lincoln Sudbury Loginal School Comitto	
Office Sought (gld District	Name of Committee Treasurer
28 Beechwood Ave Subury MA 01776	
Residential Address U	Committee Mailing Address
Bait caraforles agmail.com	B-mail:
Phone # (optional): 617 893 156 9	Phone # (optional):
017 812 10	
SUMMARY BALANC	E INFORMATION:
SOM MANAGE BALL	
Line 1: Ending Balance from previous report	U _{nd}
	Non-
Line 2: Total receipts this period (page 3, line 11)	950.° R G V V V V V V V V V V V V V V V V V V
as a discoul discolation (2)	\$70.0° = 5
Line 3: Subtotal (line 1 plus line 2)	, <u> </u>
4: Total expenditures this period (page 5, line	
The state of the s	· Em
Line 5: Ending Balance (line 3 minus line 4)	730. A SS X
	AVAIL L.
Line 6: Total in-kind contributions this period (page	ge 6)
The state of the s	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	
Affidents of Committee Treasurer:	form beautiful and balled a transport complete statement of all community finance
	of my knowledge and belief, a true and complete statement of all compaign flames patributions and liabilities for this reporting period and represents the compaign
activity, including all contributions, losse, receipts, exponitives, aucumomomy security finance activity of all persons acting under the authority or on behalf of this committee in a	
Signed under the possities of perjury:	(Tressurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 ber	(mly)
	•
Constitute with Committee	heat of my knowledge and belief, a true and complete statement of all compaign finance
activity, of all persons acting under the authority or on behalf of this committee in acc incurred any labilities nor made any expenditures on my behalf during this reporting	OURDON MIN THE LOCATED MEDICAL DE LA LOCATE DE 2001
en Trust	
Canalidate 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 companys
function in the common that report mattering and according to the fination of the common activity of all persons activity and the authority or on behalf of this	in-kind contributions and nationals for the requirements of M.G.L. C.S.
Contrarge france serving to an process strong treat on several of the	Date: 3/26/2022
Signed under the penalties of perjury:	(Candidate's nigrature)

Date Received	Name and Residential Address (alphabetical listing required)		Occupation & Employer
	5 42	Amount	(for contributions of \$200 or more)
]]	
- 11			
		L 111	
		111	
The state of the s		.	
9: Total Receipts over \$50 (
10- T	or listed above)		
receipts sen		7	
1: TOTAL PECEIPTS 250	(not listed above)		
11: TOTAL RECEIPTS IN have itemized receipts of \$50.	THE PERIOD and under, include them in line 9. Line		
receipts of \$50	and under		
	melude them in line 9. Time	Ente	TOR man 1
	Little 1	w should include a	inhy et.

SCHEDULE B: EXPENDITURES

EG.L-c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep described 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 as

	To Whom Prid			o se requies to	
	Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	3/11/2022	Face Book/Meta	1601 Willow Rd	Adverses	50.00
- 1			Menb Park CA 9404	3	
-				\[\tag{\chi}	1.2
II.					
	#	·			
II					
					استحصر
Γ					
			·		
厅					
\vdash					
	i				
				Sec.	··]
		11			
			.		
			<u> </u>		
		Li	ne 12: Total Expenditures over	r \$50 (or listed above)	
	Line 13: Total Expenditures \$50 and under* (not listed above)				
		Exter on page 1, Exe 4 -> Lin	⊭ 14: TOTAL EXPENDITU	RES IN THE PERIOD	50.00

" if you have beautiful expenditures of 150 and order, include them in line 12. Line 13 should include only those expenditures not itemized يعوث وكالمتنة

Page 4

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
::				
	•			
		:		
	;	Line 12: Expenditures over \$50	(or listed above)	
. The way and a	· -	Line 13: Expenditures \$50 and ur	nder* (not listed above)	
	i.	Line 14: TOTAL EXPENDITU	l,	

^{*} 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 Recei	ved	From Whom Received*	Residential Address	Description of Contribution	Value
	╬				
	#				
					i
					.
				F	
		-	Line 15: In-Kind Contributions of	ver \$50 (or listed above)	
			Line 16: In-Kind Contributions \$	io & under (not listed above)	
		Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	NTRIBUTIONS	0

^{*} 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
			·	
	``			
	in the state of th		/	
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				



Form CPF M 102: Campaign Finance Report CLERK **Municipal Form** SUDBURY, MASS

Office of Campaign and Political Finance

2022 APR 27 | AM 8: 4.1

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: M.	ar 11, 2022 Ending Date: Apr 26, 2022
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	n ⊠ 30 day after election ☐ year-end report ☐ dissolution
Timothy A. Anderson	
Candidate Full Name (if applicable) Goodnow Library Trustee	Committee Name
Office Sought and District 19 Raynor Road, Sudbury MA 01776	Name of Committee Treasurer
Residential Address E-mail: taa@alum.mit.edu	Committee Mailing Address E-mail:
Phone # (optional):	Phone # (optional):
SUMMARY BALAT	NCE INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 1	
Line 3: Subtotal (line 1 plus line 2)	82.5
Line 4: Total expenditures this period (page 5,	
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)
Line 7: Total (all) outstanding liabilities (page 7	7)
Line 8: Name of bank(s) used:	
Affidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the bectivity, including all contributions, loans, receipts, expenditures, disbursements, in-kin inance activity of all persons acting under the authority or on behalf of this committee igned under the penalties of perjury: COR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1) Candidate with Committee I certify that I have examined this report including attached schedules and it is, to t	in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: box only)
incurred any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority of an behalf of the support of the s	he best of my knowledge and belief, a true and complete statement of all campaign ats, in-kind contributions and liabilities for this reporting period and represents the his candidate in accordance with the requirements of M.G.L. c. 55.
gned under the penalties of perjury:	(Candidate's signature) Date. Apr 26, 2022

(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)
Apr 10, 2022	Timothy A. Anderson 19 Raynor Road Sudbury MA 01776	82.5	Computer programmer STR 600 West Cummings Park, Woburn MA 01801
Line 9: Total Rece	ipts over \$50 (or listed above)	82.5	
	eipts \$50 and under* (not listed above)	0	
	RECEIPTS IN THE PERIOD	82.5	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, pres \$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 Brigge port, if additional pages are required to report all expenditures. Please include your committee name and a name to a name to the second se

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Mar 13, 2022	Home Depot	701 Boston Post Road E, Marlborough, MA	Campaign sign posts	72.9
•				TOTAL CONTRACTOR OF THE STATE O
				13 4444
				3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	72.95
		Line 13: Total Expenditures \$50	0 and under* (not listed above)	9.55
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	82.5

^{*} 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



Signed under the penalties of perjury:

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

Office of Campaign and Political Finance

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5	\subseteq
=	$O \geq 0$
3	\square $<$
5	\subset \nearrow
-	$\mathbf{x} = \mathbf{x}$

File with: City or Town Clerkor Election Fill in Reporting Period dates: Beginning Date: **Ending Date:** 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) Committee Name Kecreation Name of Committee Treasurer Sudbury Residential Address Committee Mailing Address Telephone Number (optional): 617645 Telephone Number (optional): SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 6) Line 7: Total (all) outstanding liabilities (page 7) Da . Line 8: Name of bank(s) used: Affidavit of Committee Treasurer: 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 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. Signed under the penalties of perjury: Date: (Treasurer's signature) FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the 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. Candidate without Committee OR Candidate with independent activity filing separate 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 committee 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)
2 86 6	Jenn Stone 35 Taintor Dr. Sudbyg	158.84	Director Administration Groe Admisors LLC
3 2 20	Adam Stone 35 Taintor Dr. Sidbury	371.88	CEO/ Co-Founder Octane Marketing
3/9/22	Adam Stone 35 Taintor Dr. Sudbury	217.03	CEO/ Co-founder Octane Marketing
3/17/22	Jennifer Stone 35 Taintor Dr. Sudbury	359.88	Director, Administration Grove Advisous
3/18/22	Adam Stone 35 Taintor Dr. Slubury	109.42	CEOI (o-Founder Octane Marketing
3/23/22	Actam Stone 35 Taintor Dr. Sudbury	85. ou	CEO/Co-Founder Octane Marketins
·			
Line 9: Total Receip	ts over \$50 (or listed above)	1302.05	
Line 10: Total Receip	ots \$50 and under* (not listed above)	0	
	ECEIPTS IN THE PERIOD eccipts of \$50 and under include them in line (1362.05 e	Enter on page 1, line 2 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.

The state of the s	penditures. Please include your committee name and a page number on each page.) To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
2/28/29	Practical Image	1763 Waverly St. Framingham, 01702	Lawn Signs + Stakes	158.84	
312123	Custom Ink	Www.customink.com	Campaign Pens	371.88	
3/9/22	Custom Ink	www.customink.com	Campaign t-shirts	217.03	
	Vistaprint	170 Data Drive Natham MA 02451	Campaign business cards	109.42	
3 23 22	fast. Signs	922 Main Street Waltham, MA 02451	campaign	85,00	
3/17/22	Mailings Unlimited	116 Riverside Industrial Parkway 18Aland, ME 04103	mailer	359.88	
	I	Line 12: Total Expenditures over	r \$50 (or listed above)	1302.05	
	Line 13: Total Expenditures \$50 and under* (not listed above)				
If ba ! '		Line 14: TOTAL EXPENDITU		1302.05	

^{*} 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		·		
		·		
		·		
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and t	under* (not listed above)	
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.

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	
	e e e e e e e e e e e e e e e e e e e	Line 15: In-Kind Contributions	over \$50 (or listed above)		
		Line 16: In-Kind Contributions \$50 & under (not listed above)			
• • • • • • • •		Line 17: TOTAL IN-KIND CO		\$50	

^{*} 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.

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

te Incurred	s incurred during this reporti	Address	Purpose	Amount
66/86/2	Jenn Stone	35 Taintor Dr. Sudbury MA	Loan	158.84
12/02	Adam			371.88
3/9/22	Adam			217.03
	Stone Jenn Stone			359.88
3/17/22				109.42
3/18/22	Adam Stone Tenn			85.00
3/23/22	Jenn Stone			
	1			
·				
	Euton an mage 1.1	ine 7 → Line 18: TOTAL OUTS	STANDING LIABILITIES	(ALL) [1302.



CANDIDATE:

Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE MUNICIPAL FORM

Office of Campaign and Political Finance

Candidate

File with: City / Town Clerk or Election Commission

Full Name:

Residential Address:

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

	City / State / Zip:	Ibuny MA 01776	
	E-Mail Address: jennr	nunroe@gmail.com	Phone #: 617 645 6547
	Party Affiliation:	na	(If applicable)
OFFICE SOUG			
	Title: Par	and Recreation Co	mmissioner
	District:	own of Sudbury	
COMMITTEE:	Name of Committee:	J	12 vs -1
	Committee Mailing Address:	(The name of the committee must include the candidate's la	
	City / State / Zip:		Phone #: N S
OFFICERS:			A TE
Chairman:		Treasurer*:	9
Residential Address:		Residential Address:	23 6 5
City / State / Zip:		City / State / Zip:	
Phone #:		Phone #:	and the second s
Other Officer/Title:		and the state of t	as treasurer of any political committee (see reverse).
_		Other Officer/Title:	
Residential Address:		Residential Address:	
City / State / Zip:		City / State / Zip:	
Phone #:	(Complete and attack a Fa-	Phone #: CPF M A 101, if necessary, with other officers and finance	
the relevant election.	filing of this committee. I underst	and that a candidate shall not give consent to the orgatialed accounts and records of all campaign finance at	nization of more than one committee on his/her
and records of all cam	certain duties and liabilities under paign finance activity for a period or oyee, I must resign this position and	Candidate's signature committee. I affirm that I am not a public employee A.G.L. c. 55, including the timely filing of campaign six years from the date of the relevant election; 2) if notify OCPF of my resignation; and 3) a candidate resignation.	finance reports and keeping detailed accounts
SIGNED UNDER THI	E PENALTIES OF PERJURY:		Datas
		Treasurer's signature	Date:
	ce of Chairman of the above-name E PENALTIES OF PERJURY:	committee.	
		Chairman's signature	Date:



Form CPF M 102: Campaign Finance Report Municipal Form SUDBURY, MASS

Office of Campaign and Political Finance APR 27 AM 10: 43

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: Jan,	1 2022 Ending Date: 4/26/2022
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Eric D. Poch	NO Committee - Candidate ONLY
Candidate Full Name (if applicable)	Committee Name
Select Board Office Sought and District	Name of Committee Treasurer
28 Ruddock Road, Sudbury, MA 01776	Name of Standards
Residential Address	Committee Mailing Address
E-mail: ericpoch@gmail.com	E-mail:
Phone # (optional): 508-494-3239	Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	2152.98
Line 3: Subtotal (line 1 plus line 2)	2152.98
Line 4: Total expenditures this period (page 5, lin	ne 14) 1960.74
Line 5: Ending Balance (line 3 minus line 4)	192.24
Line 6: Total in-kind contributions this period (pa	age 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	1960.74
Line 8: Name of bank(s) used: Digital FCU	
Affidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind (finance activity of all persons acting under the authority or on behalf of this committee in	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Treasurer's signature) Date:
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting	best of my knowledge and belief, a true and complete statement of all campaign finance cordance with 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 finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this	best of my knowledge and belief, a true and complete statement of all campaign, in-kind contributions and liabilities for this reporting period and represents the
signed under the penalties of perjury:	(Candidate's signature) Date: 4/22/2022

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)
3/4/2022	Eric D. Poch (Candidate) 28 Ruddock Road Sudbury, MA 01776	1902.74	Auditor Daley & Associates
3/6/2022	Richard Flynn 68 Stock Farm Road Sudbury, MA 01776	48.06	
3/6/2022	Scott Sawin 52 Puffer Sudbury, MA 01776	48.06	
3/9/2022	Laura Handal Briggs 94 Belcher Drive Sudbury, MA 01776	48.06	
3/9/2022	Christopher Johnson 5 Ledge Road Sudbury, MA 01776	48.06	
3/2/22	Eric D. Poch (Candidate) 28 Ruddock Road Sudbury, MA 01776	29.00	
4/2/22	Eric D. Poch (Candidate) 28 Ruddock Road Sudbury, MA 01776	29.00	
ine 9: Total Recei	pts over \$50 (or listed above)	2152.98	
ine 10: Total Recei	pts \$50 and under* (not listed above)	0	
	ECEIPTS IN THE PERIOD	2152.98	

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 Receipt	ts over \$50 (or listed above)		
ine 10: Total Receip	ots \$50 and under* (not listed above)	Section 200	
	ECEIPTS IN THE PERIOD		Enter on page 1 line 2
	eceints of \$50 and under include them in line	<u> </u>	← 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.)

	To Whom Paid	nmittee name and a page number		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
2000 1 414	Campaign Partner /	PO Box 118		Amount
3/2/2022	Data Ecology LLC	Still River, MA 01467	Campaign website hosting	29.00
	Signsonthecheap.com	11525A Stonehollow Drive	Campaign signs	
3/4/2022		Suite 100 Ausitn, TX 78758		1902.74
***************************************		Ausidi, 1X 70730		
	Campaign Partner / Data Ecology LLC	PO Box 118 Still River, MA 01467	Campaign website hosting	
1/2/22	Data Ecology LEC	Sull River, MA 01467		29.00
		1 L		
		:		
1911-01-2				
	Language of the second			
		Line 12: Total Expenditures o	ver \$50 (or listed above)	1960.74
		Line 13: Total Expenditures \$5	50 and under* (not listed above)	o
	Enter on mage 1 12mg 4 ->	Line 14. TOTAL EVDENDIN	CLIDES IN THE DEDION	1060 74
		Line 14: TOTAL EXPENDIT		1960.74

^{*} 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
] [
	the state of the s			
1,1				
MOCA THE STATE OF				
		Line 12: Expenditures over \$50	(or listed above)	4 + A.A.
		T: 12. T 1'4	1 4/ /1* / 1	
		Line 13: Expenditures \$50 and t	inder* (not listed above)	
	Enter on page 1. line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	
		include them in line 12. Line 13 ch	L	

^{*} 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 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	

^{*} 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
3/2/2022	Eric D. Poch (Candidate)	28 Ruddock Road Sudbury, MA 01776	Loan to pay for campaign website	29.00
3/4/2022	Eric D. Poch (Candidate)	28 Ruddock Road Sudbury, MA 01776	Loan to pay for campaign signs	1902.74
4/2/22	Eric D. Poch (Candidate)	28 Ruddock Road Sudbury, MA 01776	Loan to pay for campaign website	29.00
	Enter on page 1, line 7 -	Line 18: TOTAL OUTSTA	ANDING LIABILITIES (ALL)	1960.74



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts					Fileide Cite		
Fill in Reporting P	eriod dates:	Beginning Date:	3/11/2022	Ending		or Town Clerk or El 7/2022	ection Commiss
Type of Report: (C	Check one)						
8th day preceding 1	preliminary [3th day preceding elect	ion 🗵 30 day	y after election	year-en	nd report 🔲	dissolution
Jean O. Nam			Commi	ittee to Elect Jea	un Nam	: N3	
Ca	andidate Full Name (i	f applicable)		ittee to Flect Jes	Committee N	ame S	0 -
Goodnow Library Trus			David I	H. Haas		AP	
1 91 Nowbridge Dd. Cod	Office Sought and	District			ame of Committee	Treasurer N	N C
81 Newbridge Rd, Sud	Residential Add	recc	81 New	vbridge Rd, Sudb			% 0
E-mail:	jeannam4sudbur		E mail:		Committee Mailing	-	Z [
Phone # (optional):			E-mail:		annam4sudbu	ıry@gmail.com	N X
(epitotial).	408	-338-9380	Phone # ((optional):		<u> </u>	<u>0</u> 70
		SUMMARY BAL	ANCE INFO	RMATION:		The second secon	7
Line 1	: Ending Balar	ce from previous repor	•				
					7.7	0	
Line 2	: Total receipts	this period (page 3, lin	e 11)		·	9.56	
Line 3	: Subtotal (line	1 plus line 2)				9.56	
Line 4:	: Total expendi	tures this period (page	5, line 14)			9.56	
Line 5:	Ending Balan	ce (line 3 minus line 4)				O	
Line 6:	Total in-kind	contributions this period	d (page 6)			o	
Line 7:	Total (all) out	standing liabilities (pag	e 7)			0	
Line 8:	Name of bank	(s) used: N/A					
nance activity of all persons a igned under the penalties of	this report including a tions, loans, receipts, acting under the authorizers	0	tee in accordance wi	dge and belief, a true nd liabilities for this th the requirements of (Treasurer's	reporting period a of M.G.L. c. 55.	ntement of all campa and represents the ca Date:	mpaign
<u>OR CANDIDATE FII</u>	<u> </u>	Affidavit of Candidate: (check	1 box only)	-	*		
	ned this report including under the authorit	ng attached schedules and it is, or on behalf of this committee es on my behalf during this repo					mpaign finance contributions,
Candidate without Comm I certify that I have examin finance activity, including	nittee ned this report includi contributions, loans	ng attached schedules and it is, t receipts, expenditures, disburser under the authority or on behalf o	to the best of my kno	owledge and belief, a	true and complet	e statement of all ca	mpaign nts the
gned under the penalties of	A					Date: April	プ ら ファッフ
, ander the penanties of	berlata:			(Candidate's	signature)	Tano. MIDINI	as, WLL

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.)

Data Dassirad	Name and Residential Address	Amores	Occupation & Employer
Date Received	(alphabetical listing required)	Amount \$9.56	(for contributions of \$200 or more)
<i>5, 2, , 2022</i>	81 Newbridge Rd Sudbury, MA 01776		
	Suddury, MA 01776		,
		\$9.56	L
ine 9: Total Rece	ipts over \$50 (or listed above)	\$9.50	
ine 10: Total Rece	sipts \$50 and under* (not listed above)	\$0	
ne 11: TOTAL I	RECEIPTS IN THE PERIOD	\$9.56	← 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)
,			
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
Line 11: TOTAL R	RECEIPTS IN THE PERIOD		← 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

Date Paid	To Whom Paid (alphabetical listing)	Address	Drumose of Farmer 1:4	A
3/27/2022	Weebly	1455 Market Street, Suite 600	Purpose of Expenditure Website Connect Site Plan for 1	Amount
		San Francisco, CA 94103		\$9.5
]		
		and the state of t		
		1		
		Line 12: Total Expenditures over	er \$50 (or listed above)	\$9.56
		Line 13: Total Expenditures \$50	and under* (not listed above)	\$(
			URES IN THE PERIOD	\$9.56

^{*} 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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
			1 ut pose of Expenditure	Amount
]				

		Line 12: Expenditures over \$50	(or listed above)	
	F			
	<u> </u>	Line 13: Expenditures \$50 and un	nder* (not listed above)	
		Line 14: TOTAL EXPENDITU	TRES IN THE PERIOD ould include only those expenditures	

^{*} 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 CO	ONTRIBUTIONS		

Page 6

^{*} 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.

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
3/27/2022	Jean Nam	81 Newbridge Rd Sudbury, MA 01776	Loan to Committee to Elect Jean Nam	\$9.56

			NDING LIABILITIES (ALL)	\$9.5



Form CPF R 1: Itemization of Reimbursements Office of Campaign and Political Finance

Office of Campaign and Political Finance One Ashburton Place, Room 411 Boston, MA 02108 (617) 979-8300 SUDBURY, MASS:

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the berson being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

		Date of Reimbursement:	4/15/2022
Name of Individual Being Reimbursed:	Jeffrey A Levine		
Committee Name:	Committee to Elect Alice Levine		
CPF ID Number (if applicable):		Telephone Number (optional):	(978) 443-1729

ITEMIZE EXPENDITURES IN EXCESS OF \$50

Date Paid	Vendor Name	Vendor Address	Purpose of Expenditure	Amount
2/17/2022	Albert Basse Associates Inc.	175 Campanelli Parkway Stoughton, MA 02072-3743	Purchase of campaign lawn signs and stakes	\$1,115.63
2/21/2022	Wordpress.com	116 Lowes Food Drive Lewisville, NC 27023	Campaign website annual fee	\$51.00
3/4/2022	Staples Connect	771 Boston Post Road Marlborough, MA 01752	Printing campaign cards	\$73.87
	(Include items listed on Page 2) →	Line 1: Expenditures in excess of	\$50 (itemized above):	1,240.5
		Line 2: Expenditures \$50 or under	50.11	
		Line 3: TOTAL AMOUNT REIN	MBURSED:	1,290.61

Signed under the penalties of perjury:		
1 / A A A	Date: 4/21/2022	
Signature of Candidate Treasurer	<u> </u>	



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts			File with	: City or Town Cler	k or Ele erio n	Commission
Fill in Reporting Period dates: Beginning Date: March	11, 2022	Ending		April 17, 2022		BURY
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	⊠ 30 day	after election		ear-end report		dution
Alice K Levine Candidate Full Name (if applicable)		tee to Elect Al		e mittee Name	<u> </u>	
Goodnow Library Trustee Office Sought and District 42 Chanticleer Road, Sudbury, MA 01776 Residential Address	42 Char	iticleer Road, S	Sudbury, Committee	e Mailing Address		
E-mail: alicelevine53@hotmail.com Phone # (optional): (978) 443-1729	E-mail: Phone # (optional):	Jan	aw@verizon.net (978) 443-17	29	
SUMMARY BALANC	E INFO	RMATION				
Line 1: Ending Balance from previous report				1,00	00	
Line 2: Total receipts this period (page 3, line 11)				290.6	51	
Line 3: Subtotal (line 1 plus line 2)				1,290.6	51	
Line 4: Total expenditures this period (page 5, lin	e 14)			1,290.6	51	
Line 5: Ending Balance (line 3 minus line 4)						
Line 6: Total in-kind contributions this period (pa	ge 6)			75	50	
Line 7: Total (all) outstanding liabilities (page 7)	v			200		
Line 8: Name of bank(s) used: Middlesex Savings B	lank					
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 both activity, of all persons acting under the authority or on behalf of this committee in activity, of all persons acting under the authority or on behalf of this committee in actincurred any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this committee.	best of my k cordance with period that a best of my k in-kind cont	nowledge and beline not otherwise discovered and beline the requirements are not otherwise discovered and beline the reduirements and the reduirements are reduirements and the reduirements and the reduirements are reduirements and the reduirements are reduirements.	his reporting the of M.G. er's signatured as true as of M.G.L. sclosed in little for the little for the little sort the school of M.G.L. sclosed in little sort the school of the little sort the school of the little sort the litt	ng period and represe L. c. 55. The Date: A The Date: A	pril 21, 20 at of all campeived any count of all campad represents	paign finance ontributions, paign s 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.)

	Name and Residential Address		Occupation & Employer			
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)			
4/15/2022	Alice Levine 42 Chanticleer Road	95.61				
.,,	Sudbury, MA 01776					
0.44./2022	Margaret Rose 23 Willis Road					
3/11/2022	23 Willis Road Sudbury, MA 01776	100				
	Saddary, Fix 01770					
		<u> </u>				
]			
ine 9: Total Recei	pts over \$50 (or listed above)	195.61				
ine 10: Total Rece	ipts \$50 and under* (not listed above)	95				
. 761-4-						
ane 11: IUIAL b	RECEIPTS IN THE PERIOD	290.61	← 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)
	(aparassis assault required)		(xor contributions of \$200 or more)
] [
]
]
Line 9: Total Receip	ots over \$50 (or listed above)		
Line 10: Total Recei	pts \$50 and under* (not listed above)		
Line 11. TOTAL D	ECEIPTS IN THE PERIOD		
	receipts of \$50 and under, include them in line	O Lina 10 ahayl	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.)

eport all expenditures. Please include your committee name and a page number on each page.) To Whom Paid						
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
4/15/2022	Jeffrey A Levine	42 Chanticleer Road Sudbury, MA 01776	Reimbursement of all campaign expense amounts owed to Jeffrey A Levine	1,240.05		
				- CALO-UN-		
	Comparison of the control of the con					
		Line 12: Total Expenditures ov	1,240.05			
		Line 13: Total Expenditures \$50	50.11			
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	1,290.61		

^{*} 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)

D-4- D-1-1	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
<u> </u>				
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and un	nder* (not listed above)	
	Enter on mass 1 line 4	Line 14: TOTAL EXPENDITU		
		include them in line 12. Line 13 sho		

^{*} 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
4/15/2022	Alice Levine	42 Chanticleer Road Sudbury, MA 01776	Forgiveness of Campaign Loan	750
		Line 15: In-Kind Contributions	over \$50 (or listed above)	750
		Line 16: In-Kind Contributions \$	550 & under (not listed above)	0
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	750

^{*} 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
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	OING LIABILITIES (ALL)	0

TOWN CLERK SUDBURY, MASS

Alice K Levine 42 Chanticleer Road Sudbury, MA 01776

2922 APR 21 PM 2: 20

April 15, 2022

Jeffrey A Levine Treasurer Committee to Elect Alice Levine 42 Chanticleer Road Sudbury, MA 01776

Checi K. herius

Dear Mr. Levine:

In connection with the financing of my campaign for Goodnow Library Trustee, I loaned the Committee Seven Hundred Fifty Dollars (\$750.00) on March 10, 2022. Please be advised that I hereby forgive this loan in its entirety.

Sincerely,

Alice K Levine



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

Office of Campaign and Political Finance

of massachuseus	Eile with City on Town Clark on Clark on Clark on Clark
Fill in Reporting Period dates: Beginning Date: Mar	rch 11, 2022 Ending Date: April 17, 2022
Type of Report: (Check one)	·
8th day preceding preliminary 8th day preceding election	⊠ 30 day after election
Katina E. Fontes	NA .
Candidate Full Name (if applicable)	Committee Name
Goodnow Library Trustee, Sudbury, MA] NA
Office Sought and District	Name of Committee Treasurer
19 Dorothy Rd, Sudbury, MA 01776	NA
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11	0
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, lin	ne 14)
Line 5: Ending Balance (line 3 minus line 4)	70 RY.
Line 6: Total in-kind contributions this period (pa	agc 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: N/A	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in	contributions 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 I bo	ox only)
	e best of my knowledge and belief, a true and complete statement of all campaign finance ecordance with the requirements of M.G.L. c. 55. I have not received any contributions, g period.
Candidate without Committee OR Candidate with independent activity filing se I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this	e best of my knowledge and belief, a true and complete statement of all campaign s, in-kind contributions and liabilities for this reporting period and represents the
ligned under the penalties of perjury:	John (Candidate's signature) Date: April 27, 2022

TOWN CLERK SUDBURY, MASS

2022 APR -8 | AM 10: 45



Form CPF M 102-0: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

City or Town of:	Subburg		Pleas	e print or type all information, except signatures.
Reporting Perio	d: Beginning: $\frac{0}{3/1}$	1/2012	Ending: 4/17/22	(MM/DD/YYYY)
Type of Report (Check One)			
		preceding election 30th day follow	wing election (town or special)	20th day of January (Year-End report)
2.1 certify tha	at I am a candidate for or currently hold	made any expenditures, or incurred any obl		to not have a campaign fund in existence
DATE	PRINT NAME	SIGNATURE Signed under the penalties of perjury	RESIDENTIAL ADDRESS (Street and Number)	OFFICE SOUGHT
4/8/22	Hang Sim	Many Sir	Il mossman wad	Suosun School Count



1822 HPR 2 StedstorBa & Spe all information, except signatures. Form CPF M 102-0: Campaign Finance Report
LUNVIN CLERK
SUDBURY, MASS Office of Campaign and Political Finance

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	Ending: 04//		$\left[igwedge X ight]$ 30th day following election (town or special)	oligations during this reporting per	RESIDENTIAL ADDRESS (Street and Number)	25 Mayle Ave						
	/ 2&2 t (MM/DD/YYYY)		☐ 8th day preceding election [汉] 30th day follo	nicipal Office. de any expenditures, or incurred any ob	SIGNATURE Signed under the penalties of perjury	CD Broths						
Sudbory	.g: 03/11		8th day preceding preliminary/primary	uant to M.G.L. Chapter 55: 1. I certify that I am a candidate for or currently hold Municipal Office. 2. I certify that I have not received any contributions, made any expend 3. I certify that I do not have a political committee.	PRINT NAME	Barol Bradfid						
City or Town of:	Reporting Period:	Type of Report: (Check One)	3th day preceding	Pursuant to M.G.L. Chapter 55: 1. I certify that I am a cand 2. I certify that I have not r 3. I certify that I do not hav	DATE	1/8/2022						



Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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injormation				ıry (Year-	apaign fur	OFFICE SOUGHT	L. bran	. Rec (-	
ı teuse print or type un injormation, except signatures.		(MM/DD/YYYY)		20th day of January (Year-End report)	have a can	OF	Goodnow Library Trustee	Parle + Rec Comm.							
nud acnai		(MM/D		☐ 20th da	nd do not] [_] [_
,	1			al)	g period, a	DRESS ober)	r Rh	Sm. Co							
	2			n or specia	s reporting	RESIDENTIAL ADDRESS (Street and Number)	Newbri der	Jak h							
	Ending:			ction (tow	during thi	RESIDER (Stree	New	S75-Peathan Rd							
				owing ele	bligations		18	(S)] [] <u> </u>				
				30th day following election (town or special)	rred any o	Signed under the penalties of perjury		Fr							
				区	es, or incu	SIGNATURE er the penalties		Who							
		(MM/DD/YYYY)		election	Office.	SIGP d under th		pro							
		(MM/D		preceding	funicipal (Signe		M							
				with day preceding election	uant to M.G.L. Chapter 55: 1. I certify that I am a candidate for or currently hold Municipal Office. 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence. 3. I certify that I do not have a political committee.										
375	2				uant to M.G.L. Chapter 55: 1. I certify that I am a candidate for or currently ho 2. I certify that I have not received any contribution 3. I certify that I do not have a political committee.	PRINT NAME	2	with							
3	Beginning:] 8th day preceding preliminary/primary	55: ndidate fo at received nave a poli	PRINT	Jean Nam	ara the				£,			
			Type of Report: (Check One)	ng prelim	Pursuant to M.G.L. Chapter 55: 1. I certify that I am a cand: 2. I certify that I have not re 3. I certify that I do not have		Jean	Mar							
own of:	Reporting Period:		teport: (C	ty precedi	to M.G.L. ertify that ertify that ertify that	Œ		25/22							
City or Town of:	Reportin		Type of k	☐ 8th dɛ	Pursuant 1. I c 2. I c 3. I c	DATE	4-25-22	स्री							

Form CPF M 102-0: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

Please print or type all information, except signatures.	(MM/DD/YYYY)		20th day of January (Year-End renort)	o not have a campaign fund in existence.	OFFICE SOLIGHT	PLANMING BOXED							
Please	Ending: $\sqrt{ \cdot }$		N 30th day following election (town or special)	ations during this reporting period, and de	RESIDENTIAL ADDRESS (Street and Number)	46 SINGLETMEN LN					292	JS	
-	(MMDD/YYYY)		30th day preceding election	itures, o	SIGNATURE Signed under the penalties of perjury	MATINITAMM M					2000 PR 27 PM 1.56	IBURY MASS	
Sult 1500	Ã	Check One)	38th day preceding preliminary/primary 8th day p	uant to M.G.L. Chapter 55: 1. I certify that I am a candidate for or currently hold Municipal Office. 2. I certify that I have not received any contributions, made any expend 3. I certify that I do not have a political committee.	PRINT NAME	JUSTIN FINNICUM							
City or Town of:	Reporting Period:	Type of Report: (Check One)	☐ 8th day preced	Pursuant to M.G.L. Chapter 55: 1. I certify that I am a cand 2. I certify that I have not n 3. I certify that I do not hav	DATE	4/11/12							



Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

SUDBURY, MASS

City or Town of:	Sudbury			Please print or in the hip radion Hapt is patures.
Reporting Period:	Beginning:	CLALLACTORMY	Ending:	4/17/22
Type of Report: (Check One)	One)			
8th day preceding p	reliminary/primary	☐ 8th day preceding preliminary/primary ☐ 8th day preceding election	30th day following election (town or special)	20th day of January (Year-End report)
Pursuant to M.G.L. Chapter 55: 1. I certify that I am a candi	pter 55: a a candidate for or cr	uant to M.G.L. Chapter 55: 1. I certify that I am a candidate for or currently hold Municipal Office		

2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.

3. I certify that I do not have a political committee.

										110110119		DATE
										UUSTIN TINNICUM		PRINT NAME
										MARMM	11.00	SIGNATURE Signed under the penalties of perjury
										46 SINGLETARY		RESIDENTIAL ADDRESS (Street and Number)
										PLANNING BIARD		OFFICE SOUGHT