









Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 3/18/2023 Ending Date: 4/25/2023 File with: City or Town Clerk or Election Commission

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☒ 30 day after election ☐ year-end report ☐ dissolution

Daniel Joseph Amicare  
Candidate Full Name (if applicable)  
King Philip School Committee  
Office Sought and District  
14 Coah Road Plainville MA 02762  
Residential Address  
E-mail: damicare2@yahoo.com  
Phone # (optional): \_\_\_\_\_

Dan Amicare For KP School Committee  
Committee Name  
Jillian Amicare  
Name of Committee Treasurer  
14 Coah Road Plainville MA 02762  
Committee Mailing Address  
E-mail: Stambert297@gmail.com  
Phone # (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)

Line 8: Name of bank(s) used:

Santander

## 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: Jah Am (Treasurer's signature)

Date: 5/1/23

## FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

### Candidate with Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

### Candidate without Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Jc Jc (Candidate's signature)

Date: 5/1/23



## 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.)

[illegible]

\* 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)**[illegible]

\* 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.)

[illegible]

Line 12: Total Expenditures over \$50 (or listed above)

2,012.46

Line 13: Total Expenditures \$50 and under\* (not listed above)

Enter on page 1, line 4 →

**Line 14: TOTAL EXPENDITURES IN THE PERIOD**

\$2,02.46

\* 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)**[illegible]

\* 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.

[illegible]

\* 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 |
|---------------------------|-------------|---------|---|--------|
|                           |             |         |   |        |
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|                           |             |         |   |        |
| Enter on page 1, line 7 → |             |         | <b>Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)</b> |        |







Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 3/18/23 Ending Date: 4/25/23 File with: City or Town Clerk or Election Commission

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☒ 30 day after election ☐ year-end report ☐ dissolution

|   |                                     |
|---|-------------------------------------|
| Maggie Clarke                             | Candidate Full Name (if applicable) |
| Select Board                              | Office Sought and District          |
| 7 Wisteria Drive                          | Residential Address                 |
| E-mail: <u>maggielclarke142@gmail.com</u> |                                     |
| Phone # (optional): <u>508-642-4299</u>   |                                     |

|                           |                             |
|---------------------------|-----------------------------|
|                           | Committee Name              |
|                           | Name of Committee Treasurer |
|                           | Committee Mailing Address   |
| E-mail: _____             |                             |
| Phone # (optional): _____ |                             |

## SUMMARY BALANCE INFORMATION:

|  |                   |
|--|-------------------|
| Line 1: Ending Balance from previous report              | <u>0</u>          |
| Line 2: Total receipts this period (page 3, line 11)     | <u>31.42</u>      |
| Line 3: Subtotal (line 1 plus line 2)                    | <u>31.42</u>      |
| Line 4: Total expenditures this period (page 5, line 14) | <u>31.42</u>      |
| Line 5: Ending Balance (line 3 minus line 4)             | <u>0</u>          |
| Line 6: Total in-kind contributions this period (page 6) | <u>          </u> |
| Line 7: Total (all) outstanding liabilities (page 7)     | <u>          </u> |
| Line 8: Name of bank(s) used:                            | <u>          </u> |

### 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: \_\_\_\_\_ (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 my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

#### Candidate without Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Maggie Clarke (Candidate's signature) Date: 5/1/23





## 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.)

[illegible]

|  |       |
|--|-------|
| Line 9: Total Receipts over \$50 (or listed above) | 31.42 |
|--|-------|

|  |  |
|--|--|
| Line 10: Total Receipts \$50 and under* (not listed above) |  |
|--|--|

|  |              |
|--|--------------|
| <b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b> | <b>31.42</b> |
|--|--------------|

← 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.







# 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:

March 28, 2023

Ending Date:

April 23, 2023

Type of Report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☒ 30 day after election

☐ year-end report

☐ dissolution

Tina M Desprez

Candidate Full Name (if applicable)

Planning Board, Plainville, MA, Norfolk County

Office Sought and District

39High Street, Plainville, MA 02762

Residential Address

E-mail: tdesprezforplainville@gmail.com

Phone # (optional): 508-699-7572

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 11)

2

Line 3: Subtotal (line 1 plus line 2)

2

Line 4: Total expenditures this period (page 5, line 14)

2

Line 5: Ending Balance (line 3 minus line 4)

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 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:

(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 my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

#### Candidate without Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Candidate's signature)

Date:

4/27/23





## 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.)

[illegible]

|  |   |
|--|---|
| Line 9: Total Receipts over \$50 (or listed above) | 0 |
|--|---|

|  |   |
|--|---|
| Line 10: Total Receipts \$50 and under* (not listed above) | 2 |
|--|---|

|  |   |
|--|---|
| <b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b> | 2 |
|--|---|

← 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)**[illegible]

← 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.)

[illegible]

\* 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)**[illegible]

\* 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.

[illegible]

\* 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 |
|--|-------------|---------|---------|--------|
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|  |             |         |         |        |
| Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL) |             |         |         |        |







Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 3/18/2023 Ending Date: 4/25/2023 File with: City or Town Clerk or Election Commission

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☒ 30 day after election ☐ year-end report ☐ dissolution

Thomas McHugh

Candidate Full Name (if applicable)

Planning Board

Office Sought and District

4 Morningside Rd.

Residential Address

E-mail: plainville.tom@gmail.com

Phone # (optional):

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 11)

95.31

Line 3: Subtotal (line 1 plus line 2)

95.31

Line 4: Total expenditures this period (page 5, line 14)

-95.31

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)

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:

(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 my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

#### Candidate without Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Candidate's signature)

Date: 5/1/2023



## 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<br>(alphabetical listing required) | Amount | Occupation & Employer<br>(for contributions of \$200 or more) |
|--|---|--------|---|
| 3/18/2023  | Thomas McHugh<br>4 Morningside Rd                               | 95.31  |   |
|  |   |        |   |
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|  |   |        |   |
| Line 9: Total Receipts over \$50 (or listed above)         |   | 95.31  | ← Enter on page 1, line 2                                     |
| Line 10: Total Receipts \$50 and under* (not listed above) |   |        |   |
| Line 11: TOTAL RECEIPTS IN THE PERIOD                      |   |        |   |

\* 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)**[illegible]

**Line 9: Total Receipts over \$50 (or listed above)**

Line 10: Total Receipts \$50 and under\* (not listed above)

**Line 11: TOTAL 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 report all expenditures. Please include your committee name and a page number on each page.)

| Date Paid                 | To Whom Paid<br>(alphabetical listing) | Address                                | Purpose of Expenditure   | Amount |
|---------------------------|--|--|--|--------|
| 3/18/2023                 | Practical Image                        | 763 Waverly St<br>Framingham, MA 01702 | Signs  | -95.31 |
|                           |  |  |  |        |
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|                           |  |  | Line 12: Total Expenditures over \$50 (or listed above)        | -95.31 |
|                           |  |  | Line 13: Total Expenditures \$50 and under* (not listed above) |        |
| Enter on page 1, line 4 → |  |  | Line 14: TOTAL EXPENDITURES IN THE PERIOD                      | -95.31 |

\* 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)**[illegible]

\* 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.

[illegible]

\* 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 |
|---|-------------|---------|--|--------|
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| <b>Enter on page 1, line 7 → Line 18:</b> |             |         | <b>TOTAL OUTSTANDING LIABILITIES (ALL)</b> |        |
|   |             |         |  |        |







Commonwealth  
of Massachusetts

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

TOWN CLERK  
PLAINVILLE  
RECEIVED

File with:  
City or Town Clerk or Election Commission

2023 MAY -2 PM 12: 06

Reporting Period: Beginning: 3/18/2023 Ending: 4/25/2023

Type of Report: 2023 Post-election Report

Wehmeyer, Gregory

Full Name of Candidate

N/A, No office

Office Sought/ District

64 Mirimichi Street,  
Plainville, MA 02762

Residential Address

Greg Wehmeyer for KP School Committee

Committee Name

Melissa Tremblay

Name of Committee Treasurer

64 Mirimichi Street  
Plainville, MA 02762

Committee Address

**SUMMARY BALANCE INFORMATION**

|   |            |
|---|------------|
| Ending balance from previous report:      | \$1,289.64 |
| Total receipts this period:               | \$100.00   |
| Subtotal:                                 | \$1,389.64 |
| Total expenditures this period:           | \$1,063.53 |
| Ending Balance:                           | \$326.11   |
| Total inkind contributions this period:   | \$0.00     |
| Total out of pocket spending this period: | \$0.00     |
| Total outstanding liabilities:            | \$0.00     |
| Name of Bank 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, inkind 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:

Melissa Tremblay

04.30.2023

Treasurer's signature (in ink)

Date

**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, and 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 and 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, disbursements,

inkind 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: RWN 4/30/23



Form 278 (Rev. 11-69)

Office of Campaign and Political Finance  
Form 278 (Rev. 11-69)

2023 MAY -2 PM12:00

Report of Contributions for the Period

Name of Report: 2023 May-2

Donor: Mr. John Doe

Recipient: Mr. John Doe

Address: 123 Main St

City: New York

State: NY

Zip: 10001

SUMMARY BALANCE INFORMATION

|                            |          |
|----------------------------|----------|
| Balance at start of period | \$0.00   |
| Contributions              | \$100.00 |
| Disbursements              | \$0.00   |
| Balance at end of period   | \$100.00 |

This report was prepared by the donor and is not subject to audit by the Commission.

Signature of Donor: [Signature]

Signature of Recipient: [Signature]

Signature of Auditor: [Signature]

Signature of Officer: [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.

| <u>Date</u> | <u>Name and Residential Address</u> | <u>Amount</u> | <u>Occupation and Employer</u> |
|-------------|-------------------------------------|---------------|--------------------------------|
|-------------|-------------------------------------|---------------|--------------------------------|

|          |              |          |  |
|----------|--------------|----------|--|
| 4/5/2023 | Field, Bruce | \$100.00 |  |
|----------|--------------|----------|--|

|  |                  |  |  |
|--|------------------|--|--|
|  | 1691 West Street |  |  |
|--|------------------|--|--|

|  |                    |  |  |
|--|--------------------|--|--|
|  | Wrentham, MA 02093 |  |  |
|--|--------------------|--|--|

---

|                          |          |
|--------------------------|----------|
| Total Itemized Receipts: | \$100.00 |
|--------------------------|----------|

|                            |        |
|----------------------------|--------|
| Total Unitemized Receipts: | \$0.00 |
|----------------------------|--------|

|                 |          |
|-----------------|----------|
| Total Receipts: | \$100.00 |
|-----------------|----------|





## 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 over \$50 and under may be added together from committee records, and reported on line 13.

| <u>Date</u> | <u>Name and Address</u> | <u>Amount</u> | <u>Purpose</u> |
|-------------|-------------------------|---------------|----------------|
|-------------|-------------------------|---------------|----------------|

|           |         |          |         |
|-----------|---------|----------|---------|
| 3/27/2023 | Allegra | \$999.58 | Mailers |
|-----------|---------|----------|---------|

|  |                  |  |  |
|--|------------------|--|--|
|  | 317 Union Street |  |  |
|--|------------------|--|--|

|  |                    |  |  |
|--|--------------------|--|--|
|  | Franklin, MA 02038 |  |  |
|--|--------------------|--|--|

|           |       |         |                |
|-----------|-------|---------|----------------|
| 3/20/2023 | Lowes | \$31.66 | Wood For Signs |
|-----------|-------|---------|----------------|

|  |                       |  |  |
|--|-----------------------|--|--|
|  | 201 Washington Street |  |  |
|--|-----------------------|--|--|

|  |                      |  |  |
|--|----------------------|--|--|
|  | Plainville, MA 02762 |  |  |
|--|----------------------|--|--|

|           |                      |         |     |
|-----------|----------------------|---------|-----|
| 4/17/2023 | Meta Platforms, Inc. | \$32.29 | Ads |
|-----------|----------------------|---------|-----|

|  |                  |  |  |
|--|------------------|--|--|
|  | 1601 Willow Road |  |  |
|--|------------------|--|--|

|  |                      |  |  |
|--|----------------------|--|--|
|  | Menlo Park, CA 94025 |  |  |
|--|----------------------|--|--|

|  |                              |            |  |
|--|------------------------------|------------|--|
|  | Total Itemized Expenditures: | \$1,063.53 |  |
|--|------------------------------|------------|--|

|  |                                |        |  |
|--|--------------------------------|--------|--|
|  | Total Unitemized Expenditures: | \$0.00 |  |
|--|--------------------------------|--------|--|

|  |                     |            |  |
|--|---------------------|------------|--|
|  | Total Expenditures: | \$1,063.53 |  |
|--|---------------------|------------|--|

