

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

City or Town of:	E LAKEVILLE		I .	Please print or type all information, except signatures.
Reporting Period:	od: Beginning:	1 - at - 2020 (MM/DD/YYYY)	Ending: 12-31-	2620 (MM/DD/YYYY)
Type of Report: (Check One)	(Check One)			
☐ 8th day prece	3 8th day preceding preliminary/primary	Sth day preceding election	30th day following election (town or special)	2 20th day of January (Near. Frod moort)
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 hav	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.	ld Municipal Office. is, made any expenditures, o	ations during this reporting period, a	nd do not have a campaign fund in existence.
DATE	PRINT NAME	Signed under the penalties of perjury	RESIDENTIAL ADDRESS (Street and Number)	OBBICE SOLICER
1-27-21	ROBERT POLLUCE		8 Paselua	Вон
				RE /ILL
				GEIVE TO
				ED O
				CLER



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

riease print or type all information, except signature	(MM/DD/YYYYY)	N 20th day of January (Vear End renaut)	2 com day or sandary (1 car-End report)	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.	OFFICE SOUGHT	FLRSC	A 180580R	Horin. og Boto	Board of Selectman					
F	Ending: 12/31/2020	30th day following election (fown or special)		igations during this reporting period, an	RESIDENTIAL ADDRESS (Street and Number)	48 MONTEOMERY ST.	11 Woodlank Kayes	11 Dittersucer Rol	30 S. Kingman St					
LAKEVILLE	(MMDDYYYY)	8th day preceding election 30th day follow		ade any expenditures, or incurred any obl	SIGNATURE Signed under the penalties of perjury	Sma-		Lister M. Cum	Lugale Febra	,				
	Beginning: 05/06/2020	narv/nrimarv	idate for or curre	<ul><li>2. I certify that I have not received any contributions, m</li><li>3. I certify that I do not have a political committee.</li></ul>	PRINT NAME	STEPHEN M. COVEN	M. John Shives	Peter Contay	=vagelia Fabian					
City or Town of:	Reporting Period:	Type of Report: (Check One)	Pursuant to M.G.L. Chapter 55:	2. I certify that I 3. I certify that I	DATE	100/8/1	1 1600 01/	1/21/2021	2-3-2021 E					



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

File with: Director Office of Campaign and Political Finance Mone Ashborton Place Fm. 41° g Monton, MA 02108 (617) 979-8300	CPF ID# 17375
Reporting Period: Beginning: 7/17/2020 Ending: 12/31/2020	
Type of Report: 2020 Year-end Report	
Day, Brian Alan	
Full Name of Candidate	Committee Name
Municipal, Local Filer	
Office Sought/ District	Name of Committee Treasurer
8 Elders Pond Drive Lakeville, MA 02347-1735	
Residential Address	Committee Address
	•
SUMMARY BALANCE IN	
Ending balance from previous report:	\$219.17
Total receipts this period:	\$0.00
Subtotal:	\$219.17
Total expenditures this period:	\$0.00
Total expenditures this period.	

	Appendix and resident and resident
Ending balance from previous report:	\$219.17
Total receipts this period:	\$0.00
Subtotal:	\$219.17
Total expenditures this period:	\$0.00
Ending Balance:	\$219.17
Total inkind contributions this period:	\$0.00
Total out of pocket spending this period:	\$0.00
Total outstanding liabilities:	\$2,000.00
Name of Bank Used:	2021 J
ffidavit of Committee Treasurer:  I certify that I have examined this report, including attached schedules and it is, to the best a true and complete statement of all campaign finance activity including all contributions, loss	ans, receipts, expenditures,
disbursements, inkind contributions and liabilities for this reporting period and represents the of all persons acting under the authority or on behalf of this committee in accordance with the	e requirements of M.G.L. c. 5.
disbursements, inkind contributions and liabilities for this reporting period and represents the	e requirements of M.G.L. c 5.
disbursements, inkind contributions and liabilities for this reporting period and represents to of all persons acting under the authority or on behalf of this committee in accordance with the	e requirements of M.G.L. cr

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.

Tocertify 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:

Candidate's signature (in ink)

20

1/27/2021



### Form CPF M 102: Campaign Finance Report

**Municipal Form** 

Fill in Reporting Period dates: Beginning Date:	Ending Date: 12312620					
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution					
Richard LaCamera —	Committee Name					
BOARD OF SELECTMEN  32 Old Powder House Rd, Lakeville	Name of Committee Treasurer					
Residential Address	Committee Mailing Address					
Telephone Number (optional):	Telephone Number (optional):					
SUMMARY BALANCE	E 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)	-0-					
Line 4: Total expenditures this period (page 5, line	:14)0 -					
Line 5: Ending Balance (line 3 minus line 4)	A'					
Line 6: Total in-kind contributions this period (page	age 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 activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind c finance activity of all persons acting under the authority or on behalf of this committee in a	ontributions and liabilities for this reporting period and represents the campaign					
Signed under the penalties of perjury:	(Treasurer's signature) Date:					
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	x 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 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 or 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: 1429/20					



of Massachus	etts		Pil - Ja	. C'			
Fill in Re	porting Period dates: Beginning Date:	110 2020	Ending Date:		or Election Commission		
Type of F	Report: (Check one)						
8th day	preceding preliminary 8th day preceding election	30 day afte	er election \( \sqrt{y} \)	ear-end report	dissolution		
	Kathryn Goodfellow		Com	nittee Name			
	MODERATOR ——			Thice Ivanic			
	19 Settlers Drive, Lakeville	1	Name of Co	mmittee Treasurer	Tire Con		
				at 3 x	22		
	Residential Address		Committee	Mailing Address	₹0		
Telephone Nu	imber (optional): 508 - 946 - 1937	Telephone Nur	Telephone Number (optional):				
ſ	SUMMARY BALAN	CE INFORM	TATION.		7		
					7		
	Line 1: Ending Balance from previous report		0				
	Line 2: Total receipts this period (page 3, line 1)	1)	0		1.		
	Line 3: Subtotal (line 1 plus line 2)		0		1		
N	Line 4: Total expenditures this period (page 5, li	ine 14)	0				
7.	Line 5: Ending Balance (line 3 minus line 4)		0				
	Line 6: Total in-kind contributions this period (p	page 6)	0		1		
			0		_		
	Line 7: Total (all) outstanding liabilities (page 7	)					
	Line 8: Name of bank(s) used:						
I certify that I	Committee Treasurer: have examined this report including attached schedules and it is, to the be	est of my knowledge	and belief, a true and con	mplete statement of all	campaign finance		
finance activit	ding all contributions, loans, receipts, expenditures, disbursements, in-kind of all persons acting under the authority or on behalf of this committee is	d contributions and I	iabilities for this reporting the requirements of M.G.I	g period and represent	s the campaign		
Signed under	the penalties of perjury:		(Treasurer's signatur				
	DIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 h	oox only)					
activity, o	te with Committee and no activity independent of the committee that I have examined this report including attached schedules and it is, to the fall persons acting under the authority or on behalf of this committee in a cury liabilities nor made any expenditures on my behalf during this reporting	he best of my knowle accordance with the r	edge and belief, a true an requirements of M.G.L.	d complete statement c. 55. I have not receive	of all campaign finance		
Candidat I certify the finance ac campaign	the without Committee OR Candidate with independent activity filing that I have examined this report including attached schedules and it is, to the stivity, including contributions, loans, receipts, expenditures, disbursement finance activity of all persons acting under the authority or on behalf of the stivity of the s	separate report	edge and belief, a true an ions and liabilities for thi ordance with the require	d complete statement of s reporting period and ments of M.G.L. c. 55	of all campaign represents the		
Signed under	the penalties of perjury: Fatty Corafell	w	(Candidate's signatur	re) Date:	2-20-20		



### Form CPF M 102: Campaign Finance Report

**Municipal Form** 

Municipal Form
Office of Campaign and Political Finance AKEVILLE TOWN CLERK

of Massachusetts	2721 JAN 20 PM 2: Delion Commission
Fill in Reporting Period dates: Beginning Date:	, 2020 Ending Date: Dec 31, 2020
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election	30 day after election
Jesse Medford BOARD OF ASSESSORS 5 Commercial Dr, #2-207, Lakeville	Committee Name  Name of Committee Treasurer
Residential Address	Committee Mailing Address
Telephone Number (optional): 508-333-1979	elephone Number (optional):
SUMMARY BALANCE I	NEODMATION.
	INFORMATION:
Line 1: Ending Balance from previous report	5
Line 2: Total receipts this period (page 3, line 11)	Ø
Line 3: Subtotal (line 1 plus line 2)	D
Line 4: Total expenditures this period (page 5, line 14	4)
Line 5: Ending Balance (line 3 minus line 4)	Ø
Line 6: Total in-kind contributions this period (page	6) 💮
Line 7: Total (all) outstanding liabilities (page 7)	Ø
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 mactivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions of all persons acting under the authority or on behalf of this committee in according under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box on 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 activity, of all persons acting under the authority or on behalf of this committee in accordincurred any liabilities nor made any expenditures on my behalf during this reporting period I certify that I have examined this report including attached schedules and it is, to the best finance activity, including contributions, loans, receipts, expenditures, disbursements, incampaign finance activity of all persons acting under the authority of on behalf of this contributions in the authority of on behalf of this contributions, loans, receipts, expenditures, disbursements, incampaign finance activity of all persons acting under the authority of on behalf of this contributions.	induces and liabilities for this reporting period and represents the campaign redance with the requirements of M.G.L. c. 55.  [Treasurer's signature]  Date:  Jav 20, 2021  Ity)  Ity of my knowledge and belief, a true and complete statement of all campaign finance ance with the requirements of M.G.L. c. 55. I have not received any contributions, od.  It report  of my knowledge and belief, a true and complete statement of all campaign finance ance with the requirements of M.G.L. c. 55. I have not received any contributions, od.
Signed under the penalties of perjury:	(Candidate's signature) Date: Jan 20, 2021



or massacituseits	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	Ending Date: 12/31/2020
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election	on 30 day after election year-end report dissolution
Jonathan J. Pink  BOARD OF ASSESSORS  34 Lakeside Ave., Lakeville  Residential Address  Telephone Number (optional):	Committee Name of Committee Treasurer  Committee Mailing Address  Telephone Number (optional):
SUMMARY BALA	ANCE INFORMATION:
Line 1: Ending Balance from previous report  Line 2: Total receipts this period (page 3, line  Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this period (page 5  Line 5: Ending Balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period  Line 7: Total (all) outstanding liabilities (page  Line 8: Name of bank(s) used:	be 11)  5, line 14)  d (page 6)
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, activity, of all persons acting under the authority or on behalf of this committee incurred any liabilities nor made any expenditures on my behalf during this report including attached schedules and it is, activity, of all persons acting under the authority or on behalf of this committee incurred any liabilities nor made any expenditures on my behalf during this report including attached schedules and it is.	(Treasurer's signature)  Late:  Late:  Late:  Mathematical Date:  Late:  Late:
Signed under the penalties of perjury:	(Candidate's signature) Date:



Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

LAKEVILLE TOWN CLERK

2021 JAN 12 AM 8: 03

Date:

1 4/2020

(Candidate's signature)

Fill in Reporting Period dates: Beginning Date:	File with: City or Town Clerk or Election Commission  Ending Date:   1/31/2020
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election	n 30 day after election year-end report dissolution
	The second of th
Adam Lynch FINANCE COMMITTEE 18 Southworth St, Lakeville	Committee Name  Name of Committee Treasurer
	Name of Committee Treasurer
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
CHMM A DW DAY A	
SUMMARY BALA	NCE INFORMATION:
Line 1: Ending Balance from previous report	Ø
Line 2: Total receipts this period (page 3, line	11)-
Line 3: Subtotal (line 1 plus line 2)	d
Line 4: Total expenditures this period (page 5,	, line 14) Ø
Line 5: Ending Balance (line 3 minus line 4)	Ø
Line 6: Total in-kind contributions this period	(page 6) <b>Ø</b>
Line 7: Total (all) outstanding liabilities (page	7) Ø
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 activity, including all contributions, loans, receipts, expenditures, disbursements, in-kinance activity of all persons acting under the authority or on behalf of this committee.	best of my knowledge and belief, a true and complete statement of all campaign finance cind contributions and liabilities for this reporting period and represents the campaign see in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Treasurer's signature) Date:
incurred any liabilities nor made any expenditures on my behalf during this report  Candidate without Committee OR Candidate with independent activity filing  I certify that I have examined this report including attached schedules and it is to	to the best of my knowledge and belief, a true and complete statement of all campaign finance in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, rting period.
rinance activity, including contributions, loans, receipts, expenditures, disbursem campaign finance activity of all persons acting under the authority or on behalf of	o the best of my knowledge and belief, a true and complete statement of all campaign tents, in-kind contributions and liabilities for this reporting period and represents the this committee in accordance with the requirements of M.G.L. c. 55



of Massachusetts		File with: (	ity or Town Cla	rk or Election Commission		
Fill in Reporting Period dates: Beginning Date:	7 16 70	λο Ending Date:	12	70)0		
Type of Report: (Check one)				1		
8th day preceding preliminary 8th day preceding election	☐ 30 da	ay after election     yea	r-end report	dissolution		
	7 [	A,				
	]		5	eco.		
Darren Beals FINANCE COMMITTEE		Commit	ree Name	- GIVEN		
19 Settlers Drive, Lakeville	_	Name of Comm	S. C.	37		
		Name of Comm	1111	1020		
Residential Address	-	Committee M	ailing Address	Wn Olerk		
Telephone Number (optional): 508 - 946 - 1937	Telepho		aring riddress			
Telephone Number (optional): 508 - 946 - 1937  Telephone Number (optional):						
SUMMARY BALAN	CE INFO	ORMATION:				
Line 1: Ending Balance from previous report						
		0		_		
Line 2: Total receipts this period (page 3, line 1	1)	0				
Line 3: Subtotal (line 1 plus line 2)		6	7.7			
Line 4: Total expenditures this period (page 5, 1	ine 14)	0				
Line 5: Ending Balance (line 3 minus line 4)		6				
Line 6: Total in-kind contributions this period (	page 6)	0		Ħ		
Line 7: Total (all) outstanding liabilities (page 7	')	0		7		
Line 8: Name of bank(s) used:				7		
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the bactivity, including all contributions, loans, receipts, expenditures, disbursements, in-kin finance activity of all persons acting under the authority or on behalf of this committee	est of my knov	wledge and belief, a true and compl s and liabilities for this reporting p with the requirements of M.G.L. c	ete statement of eriod and represe	all campaign finance		
Signed under the penalties of perjury:		(Treasurer's signature)	Date:	12/31/2020		
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 a activity, of all persons acting under the authority or on behalf of this committee in incurred any liabilities nor made any expenditures on my behalf during this reporti	he best of my accordance wi	knowledge and belief, a true and count the requirements of M.G.L. c. 5.	omplete statements. I have not rec	nt of all campaign finance		
Candidate without Committee OR Candidate with independent activity filing I certify that I have examined this report including attached schedules and it is, to t finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the contributions.	the best of my	knowledge and belief, a true and co	omplete statement porting period a ats of M.G.L. c.	at of all campaign nd represents the 55.		
Signed under the penalties of perjury:		(0.111.1.1	Date: [			



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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AKEVILLE TOWN CLERY

File with: City or Town Clerk for Greation Commission

Fill in Reporting Period dates: Beginning Date: Ending Date: 200 A Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution George Vlahopoulos Committee Name FINANCE COMMITTEE 10 Jamie's Way, Lakeville Name of Committee Treasurer Residential Address Committee Mailing Address Telephone Number (optional): 78 946 Telephone Number (optional): SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report 0 Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) 0 Line 4: Total expenditures this period (page 5, line 14) 0 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) 0 Line 8: Name of bank(s) used: None 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 or f this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: 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, dispursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority of on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

(Candidate's signature)



Signed under the penalties of perjury:

### Form CPF M 102: Campaign Finance Report

Municipal Form RECEIVED
Office of Campaign and Political Finance VILLE TOWN CLERK

2020 DEC 29 AM 9:51

Date:

(Candidate's signature)

OI IVIASSACHUSEUS	File with City of Town Clash or Floring Commission			
Fill in Reporting Period dates: Beginning Date:	File with: City or Town Clerk or Election Commission  Ending Date: 123120			
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election	30 day after election			
Richard F. LaCamera  LIBRARY TRUSTEE  32 Old Powder House Road., Lakeville	Committee Name  Name of Committee Treasurer			
Residential Address	Committee Mailing Address			
Telephone Number (optional):	Telephone Number (optional):			
CITMWADW DAY ANGE				
SUMMARY BALANCE	INFORMATION:			
Line 1: Ending Balance from previous report	<u> </u>			
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	e 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 activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind confinance 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 activity of all persons acting under the penalties of perjury:	ntributions and liabilities for this reporting period and recommend .			
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 b activity, of all persons acting under the authority or on behalf of this committee irracco incurred any liabilities nor made any expenditures on my behalf during this reporting p	ordance with the requirements of MCI a 55 I have not as a 1			
Candidate without Committee OR Candidate with independent activity filing separate I certify that I have examined this report including attached schedules and it is, to the befinance activity, including contributions, loans, receipts, expenditures, tisbursements, is campaign finance activity of all persons acting under the authority of on behalf of this contributions.	est of my knowledge and belief, a true and complete statement of all campaign			



Office of Campaign and Political Finance

Received

JAN 0 6 2021

Fill in Re	porting Period dates: Beginning Date: 7	File with: City or Town Clerk or Election Commission  (6 200 Ending Date: /				
Type of F	Report: (Check one)					
1000		30 day after election  year-end report dissolution				
	proceeding promining of the day proceeding election					
		0				
	Nancy A. Johnson LaFave	Committee Name				
	LIBRARY TRUSTEE					
	401 Bedford St., Lakeville	Name of Committee Treasurer				
	Residential Address	Committee Mailing Address				
Telephone N	umber (optional): 508-947-2688	Telephone Number (optional):				
	SUMMARY BALANC	E INFORMATION:				
	Line 1: Ending Balance from previous report					
Su .	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)	0.				
	Line 6: Total in-kind contributions this period (pa	ge 6)				
	Line 7: Total (all) outstanding liabilities (page 7)					
	Line 8: Name of bank(s) used:					
		7				
I certify that lactivity, inclu- finance activi	Committee Treasurer:  I have examined this report including attached schedules and it is, to the best iding all contributions, loans, receipts, expenditures, disbursements, in-kind of ity of all persons acting under the authority or on behalf of this committee in the penalties of perjury:	of my knowledge and belief, a true and complete statement of all campaign finance contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date:				
FOR CAN	NDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	ox only)				
I certify activity,	ate with Committee and no activity independent of the committee that I have examined this report including attached schedules and it is, to the of all persons acting under the authority or on behalf of this committee in ac any liabilities nor made any expenditures on my behalf during this reporting	e 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, a period.				
I certify finance a campaig	activity, including contributions, loans, receipts, expenditures, disbursements in finance activity of all persons acting under the authority or on behalf of the	be best of my knowledge and belief, a true and complete statement of all campaign				
Signed unde	r the penalties of perjury: Alle Mary 1 th Multing a	(Candidate's signature) Date: 0/14/21				



		File with: City or Town Clerk or Election Commission
Fill in Re	porting Period dates: Beginning Date:	Ending Date: 12/31/2020
Type of R	Report: (Check one)	
8th day	preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
	Ruth S. Gross LIBRARY TRUSTEE 2 Mullein Hill Drive, Lakeville	Name of Committee Treasurer
	Residential Address	20 TH
Telephone Nu	umber (optional): 508-947-7256	7 70
	SUMMARY BALANC	Telephone Number (optional):
	Line 1: Ending Balance from previous report	Z I I OKMATION.
	Line 2: Total receipts this period (page 3, line 11)	Ø
	Line 3: Subtotal (line 1 plus line 2)	Ø
۸.	Line 4: Total expenditures this period (page 5, line	⇒ 14) Ø
343	Line 5: Ending Balance (line 3 minus line 4)	Ø
	Line 6: Total in-kind contributions this period (page	ge 6)
	Line 7: Total (all) outstanding liabilities (page 7)	. Ø
	Line 8: Name of bank(s) used:	
I certify that I is activity, including finance activity	ommittee Treasurer: have examined this report including attached schedules and it is, to the best of ing all contributions, loans, receipts, expenditures, disbursements, in-kind contributions acting under the authority or on behalf of this committee in a the penalties of perjury:	of my knowledge and belief, a true and complete statement of all campaign finance contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date:
FOR CANI	DIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	Control of the contro
Candidate I certify th activity, of incurred ar	e with Committee and no activity independent of the committee at I have examined this report including attached schedules and it is, to the I fall persons acting under the authority or on behalf of this committee in according to the committee of the committee o	best of my knowledge and belief, a true and complete statement of all campaign finance ordance with the requirements of M.G.L. c. 55. I have not received any contributions, period.
finance act	e without Committee OR Candidate with independent activity filing sep at I have examined this report including attached schedules and it is, to the tivity, including contributions, loans, receipts, expenditures, disbursements, 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
	the penalties of perjury: Luce S. Com	



### Form CPF M 102: Campaign Finance Report

**Municipal Form** 

Office of Campaign and Political Finance

LAKEVILLE TOWN CLERK

E:11 :- D	. D . 11.			File with: City	or Town Cler	k or Election	n Compussion
riii in Ke	eporting Period dates: Beginning Date:	116/2	Endin	g Date:	131/7	120	
Type of F	Report: (Check one)				· · ·		
	preceding preliminary 8th day preceding electi	ion 30 da	ay after election	year-e	nd report	diss	olution
	— Derek Maxim —			Committee 1	Name		
	BOARD OF HEALTH 43 Vaughan Street, Lakeville			Name of Committee	ee Treasurer		
	Residential Address			Committee Maili	ng Address	-2/1	
Telephone Nu	umber (optional):	Telepho	one Number (option				
	SUMMARY BAL	ANCE INF	ORMATION	N:			
	Line 1: Ending Balance from previous repor	rt .		-0			
	Line 2: Total receipts this period (page 3, lin	ne 11)					
	Line 3: Subtotal (line 1 plus line 2)				1 .		
	Line 4: Total expenditures this period (page						
	Line 5: Ending Balance (line 3 minus line 4)	)					
	Line 6: Total in-kind contributions this period	od (page 6)					
	Line 7: Total (all) outstanding liabilities (page	ge 7)		0			
	Line 8: Name of bank(s) used:	-0					
I certify that I activity, included finance activition	Committee Treasurer: have examined this report including attached schedules and it is, to t ding all contributions, loans, receipts, expenditures, disbursements, it yof all persons acting under the authority or on behalf of this commer the penalties of perjury:	the best of my kno n-kind contribution nittee in accordance	with the requirement	a true and complete this reporting perio	statement of od and represe	all campaig	n finance apaign
FOR CAN	DIDATE FILINGS ONLY: Affidavit of Candidate: (che	eck 1 hov only)	(**************************************	- Juginitaro)			
Candida I certify t	the with Committee and no activity independent of the committee that I have examined this report including attached schedules and it is of all persons acting under the authority or on behalf of this committee any liabilities nor made any expenditures on my behalf during this re	s, to the best of my	knowledge and be	lief, a true and com s of M.G.L. c. 55.	plete statemer I have not rec	nt of all can	npaign finance
finance a	te without Committee OR Candidate with independent activity fi that I have examined this report including attached schedules and it is ctivity, including contributions, loans, receipts, expenditures, disburs a finance activity of all persons acting under the authority or on behalf	s, to the best of my	knowledge and be				npaign ts the
	the penalties of perjury: Ociek Marki	·		late's signature)	Date:	_	21



Fill in Do	montine De i 11.	File with: City or Town Clerk or Election Commission
1 III III Ke	eporting Period dates: Beginning Date:	Ending Date:
Type of I	Report: (Check one)	
8th day	preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
		0 10 10
Г	Christopher D. Spratt	Committee Name
	BOARD OF HEALTH	
	132 Howland Road, Lakeville	Name of Committee Treasurer
	Residential Address	
TalankanaN		Committee Mailing Address
I elephone Ni	umber (optional):	Telephone Number (optional):
	CHAMAIDY DIVING	DEC 2 5 2020
	SUMMARY BALANC	The state of the s
	Line 1: Ending Balance from previous report	O Calculation Dierk
8 V	Line 2: Total receipts this wait 1 ( 2 1: 40)	
	Line 2: Total receipts this period (page 3, line 11)	()
	Line 3: Subtotal (line 1 plus line 2)	0
	Line 4: Total expenditures this period (page 5, lin	e 14)
- 8	Line 5: Ending Balance (line 3 minus line 4)	
	Line 6: Total in-kind contributions this period (pa	ge 6)
	Line 7: Total (all) outstanding liabilities (page 7)	0
	Line 8: Name of bank(s) used:	
Ĺ		
I certify that I	Committee Treasurer: have examined this report including attached schedules and it is to the least	
activity, including	ding all contributions, loans, receipts, expenditures, disbursements, in-kind of	of my knowledge and belief, a true and complete statement of all campaign finance contributions and liabilities for this reporting period and represents the campaign
	y of all persons acting under the authority or on behalf of this committee in the penalties of perjury:	accordance with the requirements of M.G.L. c. 55.
		(Treasurer's signature) Date:
	DIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	conly)
I certify t	te with Committee and no activity independent of the committee hat 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
incurred a	of all persons acting under the authority or on behalf of this committee in account 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,
. Candida	te without Committee OR Candidate with independent activity filling	poriod.
finance ac	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
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.
	the penalties of perjury:	
		(Candidate's signature) Date: 12/23/20



Signed under the penalties of perjury:

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

LAKEVILLE TOWN CLERK
2021 JAN -4 PM 2: 150

Fill in F	porting Period dates: Beginning Date:	File with: City or Town Clerk or Election Comments  [16 2020] Ending Date: [2] 2022
Type of	Report: (Check one)	10 21 2000
	preceding and limit	☐ 30 day after election ☐ year-end report ☐ dissolution
	Stephen Sylvia  F/L-REG. SCHOOL DISTRICT COMMITTEE  2 Satucket Trail, Lakeville	Committee Name
		Name of Committee Treasurer
	Residential Address	Committee Mailing Address
Telephone 1	mber (optional):	Telephone Number (optional):
	SUMMARY BALANCE	E INFORMATION:
	Line 1: Ending Balance from previous report	O. O.
	Line 2: Total receipts this period (page 3, line 11)	0
•	Line 3: Subtotal (line 1 plus line 2)	
k	Line 4: Total expenditures this period (page 5, line	: 14)
	Line 5: Ending Balance (line 3 minus line 4)	G .
	Line 6: Total in-kind contributions this period (page	ge 6) O
	Line 7: Total (all) outstanding liabilities (page 7)	0
	Line 8: Name of bank(s) used:	
certify that ctivity, incli inance activ	of all persons acting under the authority or on behalf of this committee in ac-	of my knowledge and belief, a true and complete statement of all campaign finance entributions and liabilities for this reporting period and represents the campaign eccordance with the requirements of M.G.L. c. 55.
ogned unde	the penalties of perjury:	(Treasurer's signature) Date: 6 - 30 - 30
Candida I certify activity,	Example 2010 Affidavit of Candidate: (check 1 box of the committee and no activity independent of the committee at I have examined this report including attached schedules and it is, to the because I have examined the authority or on behalf of this committee in according to the property of the committee in according to the committee and property is a support of the committee of the committee in according to the committee of the committee of the committee at I have examined the committee and property of the comm	est of my knowledge and belief, a true and complete statement of all campaign finance
Candida I certify finance	without Committee OR Candidate with independent activity filing sepa	arate report est of my knowledge and belief, a true and complete statement of all campaign

(Candidate's signature)

Date:

12-30-2020



1/1/2020
Fill in Reporting Period dates:  Beginning Date:  File with: City or Town Clerk or Election Committee City of Committee Ci
Type of Report: (Check one)
☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution
Laura Ramsden  Committee Name
F/L-REG. SCHOOL DISTRICT COMMITTEE
Name of Committee Treasurer
A//A GRANN
Residential Address  Committee Mailing Address  Committee Mailing Address
Telephone Number (optional):  Telephone Number (optional):
SUMMARY BALANCE INFORMATION:
Line 1: Ending Balance from previous report
4
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:
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 chivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date:
OR 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 finan incurred any liabilities nor made any expenditures on my behalf during this reporting period.  Candidate without Committee OR Candidate with index of the committee.
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 inder the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
gned under the penalties of perjury: (Candidate's signature) Date: 0//20/202



Fill in Reporting Period dates: Beginning Date: 2	File with: City or Town Clerk or Election Commission  [16 24 20 Ending Date: 12 21 21 21 21 21 21 21 21 21 21 21 21
4	The Albo Ending Date: 12 31 2120
Type of Report: (Check one)  ☐ 8th day preceding preliminary ☐ 8th day preceding election	30 day after election
Lillian M. Drane  TOWN CLERK  11 Apple House Road, Lakeville	Name of Committee Treasurer
Residential Address	Committee Mailing Address DEC
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALANC	E 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  Line 5: Ending Balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period (page 7)  Line 7: Total (all) outstanding liabilities (page 7)  Line 8: Name of bank(s) used:	e 14)
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 of finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box 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 acc incurred any liabilities nor made any expenditures on my behalf during this reporting  Candidate without Committee OR Candidate with independent activity filing set 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 Signed under the penalties of perjury:	contributions and habitities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.



Office of Campaign and Political Finance

DEC: 8 9 2020

Fill in Reporting Period dates: Beginning Date: 5112	File with: City or Town Clerk or Election Commission   Ending Date: 12/3/12020
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election 3	0.4
y precoding election 3	0 day after election year-end report dissolution
Kenneth Upham CEMETERY COMMISSION 9 Pine Haven Lane, Lakeville	Committee Name  Name of Committee Treasurer
Residential Address	
Telephone Number (optional):	Committee Mailing Address ephone Number (optional):
SUMMARY BALANCE IN	JFORMATION.
Line 1: Ending Balance from previous report	O O
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, line 14)	0
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:	
or rame of bank(s) used.	
Affidavit of Committee Treasurer:  certify that I have examined this report including attached schedules and it is, to the best of my k ctivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contribut inance activity of all persons acting under the authority or on behalf of this committee in accordance.	nowledge and belief, a true and complete statement of all campaign finance tions and liabilities for this reporting period and represents the campaign nee with the requirements of M.G.L. c. 55.
igned under the penalties of perjury:	(Treasurer's signature) Date:
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 a activity, of all persons acting under the authority or on behalf of this committee in accordance incurred any liabilities nor made any expenditures on my behalf during this reporting period.  Candidate without Committee OR Candidate with independent activity filing separate refinance activity, including contributions, loans, receipts, expenditures, disbursements, in kind campaign finance activity of all persons acting under the authority or on behalf of this commit	eport  ny knowledge and belief, a true and complete statement of all accounts.
campaign finance activity of all persons acting under the authority or on behalf of this committing under the penalties of perjury:	contributions and liabilities for this reporting period and represents the tree in accordance with the requirements of M.G.L. c. 55.  (Candidate's signature)  Date: 13/3/120



Office of Campaign and Political Finance

AKEVILLE TOWN CLERK

File with: City or Town Clerk or Electron Commission

Fill in Re	eporting Period dates: Beginning Date:	16 3020	Ending Date:	12/31/2120	
Type of	Report: (Check one)				
100000	y preceding preliminary 8th day preceding election	30 day after	election year-	end report	dissolution
	Barbara Mancovsky PLANNING BOARD 17 Johnson Drive, Lakeville		Committee		
	Residential Address		Committee Mai	ling Address	
Telephone N	umber (optional):	Telephone Numb	per (optional):		
7	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 11  Line 5: Ending Balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period (page 7)  Line 7: Total (all) outstanding liabilities (page 7)	ne 14)	ATION:	0 0 0	
I certify that I activity, inclu	Line 8: Name of bank(s) used:  Committee Treasurer:  Thave examined this report including attached schedules and it is, to the best ding all contributions, loans, receipts, expenditures, disbursements, in-kind ty of all persons acting under the authority or on behalf of this committee is	t of my knowledge an	ad belief, a true and complete bilities for this reporting per	te statement of all cam	ipaign finance
Signed under the population of the social of this committee in accordance with the requirements of M.G.L. c. 55.					
	DIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 b	ov only)	(Treasurer's signature)	Date:	
Cardida I certify activity, incurred	the with Committee and no activity independent of the committee that I have examined this report including attached schedules and it is, to the of all persons acting under the authority or on behalf of this committee in an any liabilities nor made any expenditures on my behalf during this reporting	e best of my knowleds ccordance with the rec g period.	ge and belief, a true and con quirements of M.G.L. c. 55.	mplete statement of all . I have not received a	campaign finance
finance a	the without Committee OR Candidate with independent activity filing s that I have examined this report including attached schedules and it is, to the ctivity, including contributions, loans, receipts, expenditures, disbursement a finance activity of all persons acting under the authority or on behalf of the the penalties of perjury:	e best of my knowledg	ns and liabilities for this rep dance with the requirement	orting period and repress of M.G.L. c. 55.	campaign esents the
organed under	the penalties of perjury:		(Candidate's signature)	Date: / 2 /	30120



Fill in R	Reporting Period dates: Beginning Date:	File with: City or Town Clerk or Election Commi
Type of	Report: (Check one)	te 3th Ending Date: 12 31 2th 0
	av preceding preliminar:	☐ 30 day after election
	MILLY	
	Mark J. Knox PLANNING BOARD 87 Pierce Avenue, Lakeville	Committee Name
		Name of Committee Treasura Ceived
	Residential Address	Committee Mailing Address 2021
elephone N	Number (optional):	Telephone Number (optional): Lakeville Town Clerk
	SUMMARY BALANCI	E 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)	\$0.
	Line 4: Total expenditures this period (page 5, line	14) \$0.—
	Line 5: Ending Balance (line 3 minus line 4)	\$0.
	Line 6: Total in-kind contributions this period (page Line 7: Total (all) outstanding liabilities (page 7)	70.
	Line 8: Name of bank(s) used:	\$0. T
- L		79/1
tify that I lyity, includuce activity	f of this committee in acc	Tmy knowledge and belief, a true and complete statement of all campaign finance attributions and liabilities for this reporting period and represents the campaign cordance with the requirements of M.G.L. c. 55.
ed under	the penalties of perjury:	(Treequents simple )
Candidate I certify the activity, of incurred ar	or penditures on my benair during this reporting per	st of my knowledge and belief, a true and complete statement of all campaign finance with the requirements of M.G.L. c. 55. I have not received any contributions
Candidate I certify the finance act campaign f	e without Committee OR Candidate with independent activity filing separ at I have examined this report including attached schedules and it is, to the bestivity, including contributions, loans, receipts, expenditures, disbursements, infinance activity of all persons acting under the archerity or on behalf of this co	rate report
ed under t	he penalties of perjury:	(Candidate's signature) Date: Jan 5 2071



Office of Campaign and Political Finance

LAKEVILLE TOWN CLERK

2021 JAN - 7 AM 9: 20 Commission 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 Michelle MacEachern Committee Name PLANNING BOARD 99 County Street, Lakeville Name of Committee Treasurer Residential Address Committee Mailing Address Telephone Number (optional): 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) 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)

meetin har &

Signed under the penalties of perjury:



Municipal Form
Office of Campaign and Political Finance KEVILLE TOWN CLERK

2021 JAN -7 File with: City or Town Clark @ Flection Commission 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 Scott Holmes Committee Name PARK COMMISSION 54 Kingman Street, Lakeville Name of Committee Treasurer Residential Address Committee Mailing Address Telephone Number (optional): Telephone Number (optional): SUMMARY BALANCE 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) 0 Line 4: Total expenditures this period (page 5, line 14) 0 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) Line 8: Name of bank(s) used: NIA 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)

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,

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.

Signed under the penalties of perjury:

\_\_\_(Candidate's signature)

Date: 12 31 20



		IV)	unicipal F	orm		D
A Wilde		Office of	Campaign and Poli	tical Finance		Received
Commonwealth					1/	100
of Massachusetts	3			Pile ide Circ	- m - ct - t	07200
Fill in Repo	orting Period dates:	Beginning Date:	7/18/2020	Ending Date:	1917:11	or Election Commission
Type of Re	port: (Check one)					-verk
	receding preliminary	8th day preceding election	n 🔲 30 day after	election 💢 year-e	nd report	dissolution
	Michae	l Nolan		Committee	Name	
	PARK COM					
	21 Bells Brook			Name of Committe	ee Treasurer	
	_					
	Residential Add	ress		Committee Maili	ng Address	
Telephone Num	ber (optional):		Telephone Numi	ber (optional):		
		STIMMADY DATA	NCE DEODA	A TOTAL		
		SUMMARY BALA	INCE INFORM	ATION:		
	Line 1: Ending Balar	ace from previous report		0-		
	Line 2: Total receipts	s this period (page 3, line	:11)	0 -		
	Line 3: Subtotal (line	1 plus line 2)		- 0-		
0	Line 4: Total expend	itures this period (page 5	5, line 14)	0-		
4.	Line 5: Ending Balar	nce (line 3 minus line 4)		-0-		
	Line 6: Total in-kind	contributions this period	d (page 6)	8-		
	Line 7: Total (all) ou	tstanding liabilities (pag	e 7)	0-		
	Line 8: Name of ban	k(s) used:	ve			
Affidavit of Con	mmittee Treasurer:					
I certify that I ha	ave examined this report including	attached schedules and it is, to the	e best of my knowledge a	nd belief, a true and complete	statement of	all campaign finance
finance activity	of all persons acting under the aut	nority of on behalf of this commit	tee in accordance with the	e requirements of M.G.L. c. 5.	od and represe 5.	nts the campaign
	ne penalties of perjury:	The		(Treasurer's signature)	Date:	11/13/10
FOR CAND	IDATE FILINGS ONLY	Afridavit of Candidate: (chec	k 1 box only)			
Candidate  I certify that activity, of	with Committee and no activity t I have examined this report inch all persons acting under the author y liabilities nor made any expendi	independent of the committee	to the best of my knowled	dge and belief, a true and com equirements of M.G.L. c. 55.	aplete statemer I have not rec	nt of all campaign finance eived any contributions,
finance acti	without Committee OR Candid t I have examined this report inclu- vity, including contributions, loan inance activity of all persons actin	iding attached schedules and it is, s, recaipts, expenditures, disburse	to the best of my knowled	one and liabilities for this rene	eting popied as	. J
Signed under th	ne penalties of perjury:	MAN		_(Candidate's signature)	Date:	12/23/20



of Massachusetts	7/16/2020 File with: City or Town Clerk or Flection Commission
Fill in Reporting Period dates: Beginning Date:	File with: City or Town Clerk or Election Commission  -1-20  Ending Date: 12-20
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election	☐ 30 day after election
Joan M. Morton  CEMETERY COMMISSION  72 Highland Rd., Lakeville	Committee Name  Name of Committee Treasurer
Residential Address  Telephone Number (optional):	Committee Mailing Address  Telephone Number (optional):
SUMMARY BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	CE INFORMATION:
Line 2: Total receipts this period (page 3, line 1)	1) 0 3 5
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, li  Line 5: Ending Balance (line 3 minus line 4)	DA LIN
Line 6: Total in-kind contributions this period (p	
Line 7: Total (all) outstanding liabilities (page 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 best civity, including all contributions, loans, receipts, expenditures, disbursements, in-kind inance 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 b)	n accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date:
Candidate with Committee and no activity independent of the committee	ne best of my knowledge and belief, a true and complete statement of all campaign finance
Candidate without Committee OR Candidate with independent activity filing s I certify that I have examined this report including attached schedules and it is, to th finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of th	separate report se best of my knowledge and belief, a true and complete statement of all campaign
igned under the penalties of perjury: Abaw M. Marton	(Candidate's signature)  (Candidate's signature)  (Candidate's signature)



### Form CPF M 102: Campaign Finance Report

Municipal Form RECEIVED CLERK Office of Campaign and Political Finance

2021 JAN -6 PM 1:11

		File with: City or Town Clerk or Election Commission
Fill in R	eporting Period dates: Beginning Date:	16 2620 Ending Date: 12/31/2620
Type of	Report: (Check one)	
8th da	y preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
	Sherrill Barron  F/L-REG. SCHOOL DISTRICT COMMITTEE	Committee Name
	6 Sassamon Circle, Lakeville	Name of Committee Treasurer
	Residential Address	Committee Mailing Address
Telephone N	Number (optional):	
	(optional).	Telephone Number (optional):
	SUMMARY BALAN	CE INFORMATION:
	Line 1: Ending Balance from previous report	
	Line 2: Total receipts this period (page 3, line 11	) A
	Line 3: Subtotal (line 1 plus line 2)	
	Line 4: Total expenditures this period (page 5, li	ne 14)
	Line 5: Ending Balance (line 3 minus line 4)	
	Line 6: Total in-kind contributions this period (p	age 6)
	Line 7: Total (all) outstanding liabilities (page 7)	
	Line 8: Name of bank(s) used:	
I certify that activity, including finance activity. Signed under FOR CAN	rity of all persons acting under the authority or on behalf of this committee it rethe penalties of perjury:  NDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 below)	(Treasurer's signature) Date:
activity,	ate with Committee and no activity independent of the committee that I have examined this report including attached schedules and it is, to the of all persons acting under the authority or on behalf of this committee in a lany liabilities nor made any expenditures on my behalf during this reporting	the best of my knowledge and belief, a true and complete statement of all campaign finance occordance with the requirements of M.G.L. c. 55. I have not received any contributions, ag period.
Candida I certify finance	ate without Committee OR Candidate with independent activity filing so	separate report te best of my knowledge and belief, a true and complete statement of all campaign
Signed unde	er the penalties of perjury:	(Candidate's signature) Date: