

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

City or Town of: LAKEVILLE	
Please print or type all information, except signatures	
Fill in dates: Month Day Year Month Reporting Period Beginning MARCH 26, 2019 Ending MAN	Day Year 1, 2019
Type of Report: (Check One)	
8th day preceding preliminary/primary  8th day preceding election (Town or Special)	on 20th day of January (Year-End Report)

#### Pursuant to M.G.L., Chapter 55:

- 1. I certify that I am a candidate for or hold Municipal Office.
- 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence. 3. I certify that I do not have a political committee.

DATE	I. SIGNATURE	II DECIDENTAL ADDRESS	
-	Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/2/19	At;	3 BAKER LANC	Assesso R
1/2/19	<u></u>	8 Priscilla	BOH
1/7/19	Namey a. Johnson Ja Ja	re 401 Belford St.	Library Trustee
1/7/19	2000	10 Pine Ridge Drive	F-L Regional School Com
11/19	Muprane	. 11 Apple Houx RL	Town clerk
1/17/19	Joan M. Morton	72 Highland Road	Cemetery Commission
1-24-19	The fell.	MALBERTA LAUR	PARK COMMISSON
1/24/19	But Granny	18 Clarical	Treasurer Collector
2/7/19	Haltun Goodfeld	19 SETTLERS DR.	MODERATOR
2/7/19	Disso	19 Settlers Drive	Finance
3-18-19		2 SATYLKET TEL	FL Legiona SC
3/26/19	Jnakle 1) PM	39 CARESIDE ARE.	ASSESSONS
3/26/19	E Vaga Jaba	305. Kingman St	Selectran
	9	*	11/97



Signed under the penalties of perjury:

### Form CPF M 102: Campaign Finance Report LAKEVILLE TOWN CLERK **Municipal Form** Office of Campaign and Political Finance 2019 APR 30 AM 8: 33

of Massachuse	etts	File with: City or Town Clerk or Election Commission
Fill in Re	porting Period dates: Beginning Date: March	h 27, 2019 Ending Date: May 1, 2019
	Report: (Check one) preceding preliminary    8th day preceding election	⊠ 30 day after election
70	SERH M. ELEMMIN 6  Candidate Full Name (if applicable)	Committee Name
	Office Sought and District	Name of Committee Treasurer
11 00	Residential Address	Committee Mailing Address
Telephone N	fumber (optional): SOS 947 1875	Telephone Number (optional):
	SUMMARY BALANC	CE INFORMATION:
	Line 1: Ending Balance from previous report	Ø
	Line 2: Total receipts this period (page 3, line 11	<i>p</i>
	Line 3: Subtotal (line 1 plus line 2)	Ø
	Line 4: Total expenditures this period (page 5, li	
** I	Line 5: Ending Balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period (p	(SO.00)
. ·	Line 7: Total (all) outstanding liabilities (page 7)	
	Line 8: Name of bank(s) used:	NA
I certify that activity, inc finance activ		est of my knowledge and belief, a true and complete statement of all campaign finance id contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date:
-	NDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1	
I certif		the best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ing period.
Candi I certif finance	date without Committee OR Candidate with independent activity filing by that I have examined this report including attached schedules and it is, to	g separate report the best of my knowledge and belief, a true and complete statement of all campaign ents, in-kind contributions and liabilities for this reporting period and represents the

(Candidate's signature)



# Form CPF M 102: Campaign Finance Report Municipal Form 2019 APD CLERK

2019 APR -4 PM 3: 40

File with: City or Town Clerk or Election Commission Fill in Reporting Period dates: Beginning Date: March 27, 2019 Ending Date: May 1, 2019 Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution Committee Name lanning Board Office Sought and District Name of Committee Treasurer Pierce Ave Committee Mailing Address 508-243-3555 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) GOV 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 hi 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, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee  $\underline{OR}$  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 of 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)



## Form CPF M 102: Campaign Finance Report Municipal Fortheville TOWN GLERK

Office of Campaign and Political Finance 29 PM 3: 03

(Candidate's signature)

04/24/19

Date:

Fill in R	eporting Period dates: Beginning Date: March	File with: City or Town Clerk or Election Cor	mmission
III 10	eporting Period dates: Beginning Date: March	27, 2019 Ending Date: May 1, 2019	
Type of	Report: (Check one)		
☐ 8th day	y preceding preliminary 8th day preceding election	⊠ 30 day after election	ion
LA	URA J. RAMSDEN	None	
	Candidate Full Name (if applicable)	Committee Name	
Freet	Office Sought and District	N/A	
10 Pi		Name of Committee Treasurer	
10 PI	ne Ridge Drive  Residential Address	N/A	
Tolonkon N		Committee Mailing Address	
Telephone N	umber (optional):	Telephone Number (optional):	
Sala I	SUMMARY BALANCE	INFORMATION:	
	Line 1: Ending Balance from previous report	Ø	
	Line 2: Total receipts this period (page 3, line 11)	<i>b</i>	
	Line 3: Subtotal (line 1 plus line 2)	Ø	
-	Line 4: Total expenditures this period (page 5, line	14)	
1	Line 5: Ending Balance (line 3 minus line 4)	Ø	
	Line 6: Total in-kind contributions this period (page	e 6) Ø	
	Line 7: Total (all) outstanding liabilities (page 7)	Ø	
	Line 8: Name of bank(s) used:	9	
certify that I lectivity, includenance activity	the penalties of perjury:	(Treasurer's signature) Date:	се
OR CANI	DIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box or	nly)	
Candidate  I certify the activity, of	with Committee and no activity independent of the committee	st of my knowledge and belief, a true and complete statement of all complete.	inance
Candidate  1 certify the finance act campaign f	without Committee OR Candidate with independent activity filing separated I have examined this report including attached schedules and it is, to the best ivity, including contributions, loans, receipts, expenditures, disbursements, inlinance activity of all persons acting under the authority or on behalf of this contributions.	rate report st of my knowledge and belief, a true and complete statement of all accounts.	.5115,
gned under t	he penalties of perjury:	70 mm	