

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	10/17 Ending Date: 4/22/17
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Nancy J. Morrison Candidate Full Name (if applicable) FOXBOVO SChool Committee Office Sought and District The South Grove St. Residential Address	Committee Name Name of Committee Treasurer Committee Mailing Address
Residential Address . Telephone Number (optional):	Telephone Number (optional):
	2
SUMMARY BALANCE	E INFORMATION:
Line 1: Ending Balance from previous report	<u> </u>
Line 2: Total receipts this period (page 2, line 11)	S O
Line 3: Subtotal (line 1 plus line 2)	\$ O
Line 4: Total expenditures this period (page 3, line	e 14) <u>\$ 371.88</u>
Line 5: Ending Balance (line 3 minus line 4)	40
Line 6: Total in-kind contributions this period (page	ge 4) \$ ()
Line 7: Total (all) outstanding liabilities (page 4)	\$ 371.88
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 of finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:	ontributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	c only)
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting	
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury: Many A. M. O.	(Candidate's signature) Date: 4 22 17

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical insting required)	AMOUNT	(tor contributions of \$200 or more)
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	•	11	
a Q. Total Descint	s over \$50 (or listed above)		
		1	
e 10: Total Receip	ts \$50 and under* (not listed above)		
e 11: TOTAL RE	CEIPTS IN THE PERIOD		← Enter on page 1 line 2
	popints of \$50 and under include them in line 0		← Enter on page 1, line 2

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 exp enditures. Please include your committee name and a page number on each page.)

report all exp enditures. Please include your committee name and a page number on each page.)				
TO	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
3/6/17	Graphic Images	75 Washington St. Plain Ville, mA	signs	\$371.88
			CONTRACTOR	
			···	
			·	
			,	
Line 12: Total Expenditures over \$50 (or listed above)		\$371.88		
	<u> </u>	Line 13: Total Expenditures \$50		
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD [437]. 88 If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized				

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 3

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
contributes more than	bution is received from a person who n \$50 in a calendar year, you must report	Line 15: In-Kind Contributions	over \$50 (or listed above)	0
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.		Line 16: In-Kind Contributions \$50 & under (not listed above)		0
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	0

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		Address	Purpose	Amount
3/6/17	Nany morrison	77 South Grove		\$371.88
		·	·	
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				