

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

Office of Campaign and Political Finance

of Massachusetts		File with:	City or Town Clerk o	or Election Commission
Fill in Reporting Period dates: Beginning Date:	1/19/21	Ending Date:	12/31/-	/
Type of Report: (Check one)				
8th day preceding preliminary 8th day preceding election	☐ 30 day	after election ye	ar-end report [dissolution
Candidate Full Name (if applicable) Plank LATIKIN Rellings Candidate Full Name (if applicable) Planking Bond Westwood MA Office Sought and District St. Green 14 [1] Rd Westwood MA Residential Address	205	COMMITTER TO CIDE COMMITTER TO CIDE COMMITTER TO CIDE COMMITTER TO	nmittee Treasurer	
E-mail:	E-mail:			
Phone # (optional): 781 - 762 - 1347	Phone # (o	optional): 781 - 3	126-5712	
SUMMARY BALANC	CE INFO	RMATION:	1	
		The state of the s		1
Line 1: Ending Balance from previous report		93	59.48	
Line 2: Total receipts this period (page 3, line 11	.)	7	_	49 0
Line 3: Subtotal (line 1 plus line 2)		95	9.48	
Line 4: Total expenditures this period (page 5, line	ne 14)	900	0,00	
Line 5: Ending Balance (line 3 minus line 4)		5	°S . L8]
Line 6: Total in-kind contributions this period (p	page 6)]
Line 7: Total (all) outstanding liabilities (page 7))	2 25	4.24	
Line 8: Name of bank(s) used: Newshorn	BANKL	JCSTWOOD MA]
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee i Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 below the committee in the committ	d contributions n accordance w	and liabilities for this reporting	g period and represent c. 55.	
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 activity, of all persons acting under the authority or on behalf of this committee in a incurred any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee OR Candidate with independent activity filing.	he best of my kaccordance with	n the requirements of M.G.L. c	d complete statement c. 55. I have not receive	of all campaign financ wed any contributions,
I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the signed under the penalties of perjury:	he best of my k	nowledge and belief, a true and tributions and liabilities for this	is reporting period and ments of M.G.L. c. 55 Date:	represents the

SCHEDULE A: RECEIPTS

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

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

port all receipts. Please include your committee name and a page number on each page.) Name and Residential Address Occupation & Employer				
Date Received	(alphabetical listing required) Amount		(for contributions of \$200 or more)	
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Line 9: Total Recei	ipts over \$50 (or listed above)	1		
ine 10: Total Desa	sinta \$50 and undo-* (not list distance)			
Line IV. Total Rece	eipts \$50 and under* (not listed above)	L	<u>l</u>	
Line 11: TOTAL I	RECEIPTS IN THE PERIOD	_	← Enter on page 1, line 2	
	d receipts of \$50 and under include them in lin	L	선물 문화가 있었다. 그런 그 그리고 하는 그 그리고 있다는 사람들이 되었다. 그는 그는 그 그 그리고 있다.	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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1.52.4			
		3.1	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Recei	pts \$50 and under* (not listed above)		
Line 11: TOTAL R	ECEIPTS IN THE PERIOD	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	← Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

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

eport all expenditures. Please include your committee name and a page number on each page.)				
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
5-28-21	Ellan LMKIN	86 GREENHI//75 WESTUSOD MA	REDAY CAMPAIGN LIABILITIES	900,00
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	*		1	
-			^ · · ·	
				3
			#	
Y 19				
	-			
		Line 12: Total Expenditures over \$50 (or listed above)		90000
		Line 13: Total Expenditures \$50 and under* (not listed above)		
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD			90000	

Received January 28, 2022

SCHEDULE C: "IN-KIND" CONTRIBUTIONS Westwood Town Clerk

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	
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		7			
)			
·		Line 15: In-Kind Contributions	over \$50 (or listed above)		
		Line 16: In-Kind Contributions	\$50 & under (not listed above)		
	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				

^{*} 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.

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SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount
3-22.18	Blan Rollina	SL Granville RD Narabad MA	LOPM TO COMMITTEE	240 93
3.23.18	Ellen Rollines	86 Greenville TDD Westwood MA	LOND TO COMMITTEE	259 00
4-12-18	Bllen Tullinas	SC GREENVIlle RD! Westwood MA	LOND TO CONNITTEE	483 38
4-10.18	BILEN Rollings	81 Grewville PD Westweed MA	LONS TO COMMITTER	470 ~
5.8-18	Ellen Rollings	EL GACCAVITE RO Lestupad MA	LOAM TO COMMITTEE	367 78
3.20.21	Ellan Rollings	86 GREENVIlle RO WESTWOOD MA	LOON TO COMMITTER	433 '4
	į			
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIA			DING LIABILITIES (ALL)	2254 24/