

Commonwealth of Hassachusetts

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

F1le	W11	th:				
City	or	Town	Clerk	or	Blection	Commission

Reporting Period: Beginning: 1/1/2024 Ending: 4/12/2024

Type of Report: 2024 Pre-preliminary Report

Plotkin, Maya

Full Name of Candidate

School Committee

Office Sought/ District

165 Clapboardtree Street Westwood, MA 02090

Residential Address

Plotkin Committee

Committee Name

Sara Michelmore

Name of Committee Treasurer

558 Clapboardtree Street Westwood, NA 02090

Committee Address

SUMMARY BALANCE INFORMATION

Ending balance from previous report:	\$304.72
Fotal receipts this period:	\$350.00
Subtotal:	\$654.72
Fotal expenditures this period:	\$591.01
Inding Balance:	\$63.71
otal inkind contributions this period:	\$0.00
otal out of pocket spending this period:	\$0.00
Fotal outstanding liabilities:	\$0.00
Name of Bank Used: Needham Bank	

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 N.G.L.c. 55.

Signed under the penalties of perjury:

Treasurer a signature (in ink)

4/17/24 Date

Affidavit of Candidate:

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.

Signed under the penalthes of perjury:

Candidate s signature (in ink)

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WESTWOOD TOWN CLERK RCVD 2024 APR 22 PM12:55

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.

Date	Name and Residential Addres	<u>s</u>	Amount Occupation and Employer
3/10/2024	Parmalee, Dori	_	\$100.00
	88 School St		
	Westwood MA 02090		
3/10/2024	Plotkin, David		\$100.00
	165 Clapboardtree St		
	Westwood, MA 02090		
4/12/2024	Plotkin, David		\$150.00 Attorney
	165 Clapboardtree St		Brightcove
	Westwood, MA 02090		2000 14
		Total Itemized Receipts:	\$350.00
		Total Unitemized Receipts:	\$0.00
		Total Receipts:	\$350.00

WESTWOOD TOWN CLERK RCVD 2024 APR 22 PM12:55

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.

Date Name and Address 4/12/2024 Dori Parmalee		-	Amount \$100.00	Purpose Refund
88 School St			\$100.00	Rotulid
Westwood, MA 02090				
3/10/2024 Paypal			\$6.76	Transaction Fee
2221 North First St				
San Jose, CA 95131				
4/12/2024 Paypal			\$1.94	Transaction Fee
2221 North First St				
San Jose, CA 95131				
4/12/2024 Plotkin, Maya			\$482.31	
	Total Itemized Expenditures:		\$591.01	
	Total Unitemized Expenditures:		\$0.00	
	Total Expenditures:		\$591.01	



Schedule R: Reimbursements

Date Reimbursee
4/12/2024 Plotkin, Maya

Total Amount \$482.31



WESTWOOD TOWN CLERK Form CPF R1: Item! wation of Reimbursements Of Massachusetts Office of Campaign and Political Finance

File	wi	thr				
City	OF	Town	Clerk	or	Election	Complesion

Plotkin	Plotkin Committee
Individual Being Reimbursed	Committee Name
<u>\$482.31</u>	4/12/2024
Amount of Reimbursement	Date of Reimbursement

Date Name And Address 3/12/2024 Connoly Printing 17B Gill St Woburn, MA 01801

Amount Purpose \$482.31 50 campaign signs