

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 Commissio
Fill in Reporting Period dates: Beginning Date: 4/29	8/2017 Ending Date: 5/9/2017
Type of Report: (Check one) Bth day preceding preliminary 8th day preceding election	⊠ 30 day after election
Kimberly Mills-Booker Candidate Full Name (if applicable)	not applicable Committee Name
Office Sought and District 171 Maplewood Drive, Hanover, MA 02339	Name of Committee Treasurer
Residential Address E-mail: kimandmikebooker@gmail.com Phone # (optional): 781-829-1164	Committee Mailing Address E-mail:
Phone # (optional): 781-829-1164 SUMMARY BALANCE	Phone # (optional): CE INFORMATION:
Line 1: Ending Balance from previous report	CE INFORMATION:
Line 2: Total receipts this period (page 3, line 11)	18.01
Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, lin	ne 14) 18.01
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (pa Line 7: Total (all) outstanding liabilities (page 7)	o o
Line 8: Name of bank(s) used: Rockland Trust	
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 Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo)	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:
Candidate with Committee and no activity independent of the committee A 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 cordance with the requirements of M.G.L. c. 55. I have not received any contributions
Candidate without Committee OR Candidate with independent activity filing sep 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 puthority or on 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: 58 3017

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.)

Date Received	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)	
5/1/17	Kimberly Booker	\$5.26		
5/5/17	Kimberly Booker	\$12.75		
			*	
Line 9: Total Rece	ipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above) \$18.01				
Line 11: TOTAL RECEIPTS IN THE PERIOD \$18.01			← 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 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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r received			·		
Particular and a state of the s					
Line 9: Total Receip	ts over \$50 (or listed above)				
Line 10: Total Receip	ots \$50 and under* (not listed above)		· · · · · · · · · · · · · · · · · · ·		
	ECEIPTS IN THE PERIOD	\$18.01	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.)

Date Paid	To Whom Paid (alphabetical listing)	nmittee name and a page numb Address	Purpose of Expenditure	Amount
		_		Amount
5/1/17	Home Depot	Hingham St Rockland, MA	Sign stands	\$5
	Fact Close	1 Wachington Ct		<u></u>
/5/17	Fast Signs	Washington St Hanover, MA	slgn stands	12
		10		
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		1		
				440,000
	The state of the s			
		Line 12: Total Expenditures	s over \$50 (or listed above)	
-			s \$50 and under* (not listed above)	\$18.0
	Enter on page 1. line 4 →	Line 14: TOTAL EXPENI		

* 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 4

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
771				
And the state of t				
	77 - 77 - 78 - 78 - 78 - 78 - 78 - 78 -			
				#
		3,300		
		Line 12: Expenditures over \$50	(or listed above)	
Line 13: Expenditures \$50 and under* (not listed above)				
	<u> </u>	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	\$18.01

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

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
	planting and the state of the s			
	And the state of t			
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
	-	Line 16: In-Kind Contributions \$		
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	NTRIBUTIONS	

^{*} 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.

SCHEDULE D: LIABILITIES

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

Date Incurred	To Whom Due	Address	Purpose	Amount
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·		Consideration of the Considera		
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND		0