

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance.

Ending Date: Fill in Reporting Period dates: Beginning Date: Type of Report: (Check one) dissolution year-end report 8th day preceding preliminary 30 day after election ★ 8th day preceding election Committee To Elect Allison Sgambato Allison B. Sgambato Committee Name Candidate Full Name (if applicable) Kate E. Pelopida School Committee, Hanover ame of Committee Treasurer Office Sought and District 30 Hickory Lane, Hanover, MA 02339 Committee Mailing Address Residential Address 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) 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: Citizens 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 financeactivity, 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 M.G.L. c. 55. Date: 4/28/2022 Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) 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. Thave 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. Candidate without 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, 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 or on behalf of this candidate in accordance with the requirements of M.G.E. c. 55. signed under the penalties of perjury:

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 vear. 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)
4/20/2022	Cianciola, Jeanne 81 Old Town Way Hanover, MA 02339	\$400.00	Retired
4/27/2022	Dixon, Walter 121 Hanover Street Hanover, MA 02339	\$100.00	
4/27/2022	Flood, Karen 276 Brook Circle Hanover, MA 02339	\$100.00	The state of the s
4/12/2022	Molyneux, Leslie 23 Water Street Hanover, MA 02339	\$100.00	
4/20/2022	Murphy, Kenneth and Carla Brookwood Road Hanover, MA 02339	\$25.00	
4/14/2022	Sobel, Kerri-Lynn 1 Valley Drive Johnston, RI 02911	\$25.00	
		- 1749 T ₂ 17 18 18 18	
Line 9: Total Rece	ipts over \$50 (or listed above)	\$750,00	
Line 10: Total Reco	eipts \$50 and under* (not listed above)		
Line II; TOTAL	RECEIPTS IN THE PERIOD	\$150,00	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

Date Paid	To Whom Paid (alphabetical listing)	Address Purpose of Expenditure	Amount
	Town of Hanover		
4/13/2022		Hanover, MA 02339	\$5.00
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	Company of the second		
		Line 12: Total Expenditures over \$50 (or listed above)	
		Line 13: Total Expenditures \$50 and under* (not listed above)	
	Enter on page 17 line 4	Line 14: TOTAL EXPENDITURES IN THE PERIOD	#5,00

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

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.

ate Received	From Whom Received*	Residential Address	Description of Contribution	Value
旧節	Kate E. Pelopida	41 Stony Brook Drive Cranston, RI 02920	Signs and Metal Stakes	\$ 00.00
4/14/20	Kyle S. Pelopida	41 Stony Brook Drive Cranston, RI 02920	Signs and Metal Stakes	#614.06
		P		
				9/201
		Line 15: In-Kind Contributions over \$50 (or listed above)		#1514.0V
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS ****	H KILL XX

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 well as those liabilities incurred during this reporting period.

ate Incurred	To Whom Due	Address	Purpose	Amount
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				10 kg (10 kg)

er on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALI