

of Massachusetts

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

File with: Director Office of Campaign and Political Finance One Ashburton Place Rm. 411 Boston, MA 02108 (617) 979-8300

2022 JUN -6 AM 10F 15P# 16247

TOWN CLERK

Reporting Period: Beginning: 4/30/2022 Ending: 6/6/2022

Type of Report: 2022 Post-election Report

Harder-Bernier, Cathy Full Name of Candidate

Municipal, Local Filer Office Sought/ District

143 Maplewood Drive Hanover, MA 02339 Residential Address

Harder-Bernier Committee

Committee Name

Theresa Delahunt Name of Committee Treasurer

43 Forest Street Hanover, MA 02339

Committee Address

| SUMMARY BALANCE IN | NFORMATION |
|---|-------------------------------|
| Ending balance from previous report: | \$1,961.78 |
| Total receipts this period: | \$1.08 |
| Subtotal: | \$1,962.86 |
| Total expenditures this period: | \$5.00 |
| Ending Balance: | \$1,957.86 |
| Total inkind contributions this period: | \$0.00 |
| Total out of pocket spending this period: | \$0.00 |
| Total outstanding liabilities: | \$0.00 |
| Name of Bank Used: | Rockland Federal Credit Union |

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, inkind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the pauthority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

MO ne+e

Treasurer's signature (in ink)

Signed under the

Affidavit of Candidate (check 1 box only) :

alt

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report, and 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.

Candidate without Committee OR candidate with independent activity filing separate report.

I certify that I have examined this report and 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, disbursements,

inkind contributions and liabilities for this reporting period and represents the campaign finance activity

Apersons acting under the Authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. of all phe penalties of perjury: Signed 22 le

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Candidate's signature (in ink)

Date

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 Address | | Amount Occupation and Employer |
|-----------|-------------------------------|-------------------------|---------------------------------------|
| 5/31/2022 | Rockland Federal Credit Union | | \$1.08 |
| | 1775 Washington Street | | |
| | Hanover, MA | | |
| | Т | otal Itemized Receipts: | \$1.08 |
| | Tota | al Unitemized Receipts: | \$0.00 |
| | | Total Receipts: | <u>\$1.08</u> |

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.

| DateName and Address6/1/2022Harder-Bernier, Cathy | | Amount <u>Purpose</u> \$5.00 | |
|---|---|---------------------------------|--|
| | Total Itemized Expenditures: | \$5.00 | |
| | Total Unitemized Expenditures: Total Expenditures: | \$0.00 <u>\$5.00</u> | |



Commonwealth of Massachusetts

Form CPF R1: Itemization of Reimbursements Office of Campaign and Political Finance

File with: Director Office of Campaign and Political Finance One Ashburton Place Rm. 411 Boston, MA 02108 (617) 979-8300

CPF ID# 16247

Harder-Bernier Individual Being Reimbursed \$5.00 Amount of Reimbursement Harder-Bernier Committee Committee Name 6/1/2022 Date of Reimbursement

DateName And Address4/15/2022Town of Hanover550 Hanover StreetHanover, MA 02339

Amount Purpose \$5.00 lawn sign permit

Schedule R: Reimbursements

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Date Reimbursee 6/1/2022 Harder-Bernier, Cathy

Total Amount