A 🛪 🕺 Mu	Campaign Finance Report nicipal Form npaign and Political Finance					
Commonwealth of Massachusetts						
Fill in Reporting Period dates: Beginning Date: 4/2/	File with: City or Town Clerk or Election Commission         Ending Date: $5/5/2.3$					
Type of Report: (Check one)						
8th day preceding preliminary 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution					
Doborah Wessling Candidate Full Name (if applicate) Library Trustee Office Sought and District 61 Manhs OR, Hanover, M.A, 02339 Residential Address E-mail: debuess & comcastine t Phone # (optional):	Committee Name Committee Name Committee Treasurer Committee Mailing Address E-mail: Phone # (optional):					
SUMMARY BALANC	CE INFORMATION:					
Line 1: Ending Balance from previous report	Ø					
Line 2: Total receipts this period (page 3, line 11)	388.79					
Line 3: Subtotal (line 1 plus line 2)	388.79					
Line 4: Total expenditures this period (page 5, lin	ne 14) 388a 79					
Line 5: Ending Balance (line 3 minus line 4)	1 de la companya de l					
Line 6: Total in-kind contributions this period (pa	age 6)					
Line 7: Total (all) outstanding liabilities (page 7)						
Line 8: Name of bank(s) used:	mploques Credit Union					
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the bes 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 in	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.					
Signed under the penalties of perjury: (Treasurer's signature) Date:						
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	ox only)					
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 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.

 $\mathcal{G}$  and id at e without Committee <u>OR</u> Candidate with independent activity filing separate report

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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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Candidate's signature)

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.

(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		
		Amount	(for contributions of \$200 or more)		
4/24/23	Deborah Wessing 61 Manns Dr, Hanover, MA 02339	383.79	Self employed		
5/4/23	Debonh Wessing GIMANNSOR Hanover, MIA02339	5-	Selfemployed		
Line 9: Total Receipts over \$50 (or listed above)		388.79			
Line 10: Total Rece	ipts \$50 and under* (not listed above)				
Line 11: TOTAL F	RECEIPTS IN THE PERIOD	← 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)	
Line 9: Total Receipts over \$50 (or listed above)				
Line 10: Total Receipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD		← 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)	Address	Purpose of Expenditure	Amount
4/26/23	Signs.com	1550 Gladiolast Salt Lake city. UT	Signs	383779
	Town of Hanover Sign		Permit	5-
		Line 12: Total Expenditures over	er \$50 (or listed above)	388.79
		Line 13: Total Expenditures \$50	and under* (not listed above)	

Enter on page 1, line  $4 \rightarrow$  Line 14: TOTAL EXPENDITURES IN THE PERIOD

\* 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