

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachu	isetts		F	ile with:	City or Town Cl	erk or Ele	ction (Commissio
Fill in R	eporting Period dates: Beginning Date: Jan	1, 2023	Ending D		May 5, 2023			
Гуре of	Report: (Check one)							
8th da	ay preceding preliminary 🔀 8th day preceding election	30 day	after election	□у	ear-end report	[] d	lissolu	ution
Peter Oui	inn Miraglia							
	Candidate Full Name (if applicable)	-		Comm	nittee Name			
School Co	Office Sought and District	_	Nam	a of Co	nmittee Treasurer		2	
710 Cente	er Street, Hanover, MA 02339		Ivan		nmittee Treasurer	mad	23 -	
TO CON	Residential Address		Cor	mmittee	Mailing Address	1		
-mail:	petermiraglia@gmail.com	E-mail:				at Fline		C3
hone # (op	tional):		optional):			(L.)	2>>	
							K	
	SUMMARY BALAN	CF INFO	PMATION.				<u></u>	1
	SUMMART DALAN						Ŧ	200
	Line 1: Ending Balance from previous report				e	0		Rec'o
	Line 2: Total receipts this period (page 3, line 1	1)				0		VYA
	Line 3: Subtotal (line 1 plus line 2)					0		ema
	Line 4: Total expenditures this period (page 5, 1	ine 14)			155	.78		S S S
	Line 5: Ending Balance (line 3 minus line 4)				155	.78		Un
	Line 6: Total in-kind contributions this period (J	page 6)		1		0		
	Line 7: Total (all) outstanding liabilities (page 7)				0		
	Line 8: Name of bank(s) used:				****			
certify that ctivity, inclu nance active	Committee Treasurer: I have examined this report including attached schedules and it is, to the buding all contributions, loans, receipts, expenditures, disbursements, in-kin rity of all persons acting under the authority or on behalf of this committee er the penalties of perjury:	d contributions a in accordance w	and liabilities for this with the requirements o	reporting of M.G.L	g period and repres	f all campa sents the c	aign fii ampai	nance gn
OR CAN	NDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1	box only)						
I certify activity,	ate with Committee that I have examined this report including attached schedules and it is, to t of all persons acting under the authority or on behalf of this committee in d any liabilities nor made any expenditures on my behalf during this report	accordance with	the requirements of M	M.G.L. c	. 55. I have not re	ent of all c ceived any	ampai y contr	gn finance ributions,
I certify finance	ate without Committee that I have examined this report including attached schedules and it is, to t activity, including contributions, loans, receipts, expenditures, disbursement of finance activity of all persons acting under the authority or on behalf of	nts, in-kind cont	ributions and liabilitie	s for this	reporting period	and repres	ampai, sents th	gn 1e
ianed unde	er the penalties of perjury: Peter Miraglia		(Candidate's	signatur	e) Date:	May 5, 2	2023	
igneu unue								

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)
Date Received	(alphabetical listing required)	Amount	(101 contributions of \$200 or more)
	· · · · · · · · · · · · · · · · · · ·		
Line 9: Total Receipts over \$50 (or listed above) 0			
Line 10: Total Rece	ipts \$50 and under* (not listed above)	0	
Line 11: TOTAL R	ECEIPTS IN THE PERIOD	0	← 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.

Page 2

SCHEDULE A: RECEIPTS (continued)

-	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
		×	
		[]	
Line 9: Total Recei	pts over \$50 (or listed above)	0	
Line 10: Total Rece	ipts \$50 and under* (not listed above)	0	
Line 11: TOTAL F	RECEIPTS IN THE PERIOD	0	← 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.)

	To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
Apr 10, 2023	Lowe's	108 Old Church St, Pembroke MA	Campaign sign materials	155.78	
		Line 12: Total Expenditures over	er \$50 (or listed above)	155.78	
Line 13: Total Expenditures \$50 and under* (not listed above)					
	Enter on page 1, line 4 \rightarrow	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	155.78	

* 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
		Address		Amount
	[
		Line 12: Expenditures over \$50	0	
		Line 13: Expenditures \$50 and u	under* (not listed above)	0
	Enter on page 1, line 4 \rightarrow	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	0

* 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
	[]			
I		Line 15: In-Kind Contributions	0	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	0
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	0

* 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.

Date Incurred	To Whom Due	Address	Purpose	Amount
	Enter on page 1, line $7 \rightarrow$	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	0

Page 7



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: In 1, 2023 Ending Date: May 5, 2023 Type of Report: (Check one) Sh day preceding preliminary Sh day preceding preliminary Sh day preceding preliminary Idea to the state of t	of Massachusetts		File w	rith: City or Town Clerk o	r Election Commission
Bith day preceding preliminary Sith day preceding election 30 day after election year-end report dissolution Peter Quinn Miraglia Candidate Full Name (fl applicable) Committee Name Generative Name	Fill in Reporting Period dates: Beginning Date: Jan	1, 2023			
Peter Quinn Miraglia Candidate Full Name (if applicable) Hanover School Committee Office Sough and District 710 Center St, Hanover Ma 02329 Residential Address Be mail: petermiraglia@gmail.com Phone # (optional): Committee Mailing Address Be mail: petermiraglia@gmail.com Phone # (optional): Image: Provide address address SUMMARY BALANCE INFORMATION: Image: # (optional): Line 1: Ending Balance from previous report 0 Line 2: Total receipts this period (page 3, line 11) 155.78 Line 4: Total capenditures this period (page 5, line 14) 155.78 Line 6: Total in-kind contributions this period (page 6) 0 Line 6: Total (all) outstanding liabilities (page 7) 0 Line 7: Total (all) outstanding liabilities (page 7) 0 Line 6: Total in-kind contributions this period (page 6) 0 Continets Present: Creatifies for 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 caritry, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of All.c. c. 5. Restright that have examined this report including attached schedules	Type of Report: (Check one)				
Condidate Full Name (if applicable) Hanover School Committee Office Sought and District 710 Center St, Hanover MA 02339 Residential Address E-mail: petermiraglia@grail.com Phone # (optional): SUMMARY BALANCE INFORMATION: Line 1: E-mail: SUMMARY BALANCE INFORMATION: 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: Endig 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: Office and the approximate of the argoptical adresses the ampaign finance critrity that Have examined this report including attacked schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance critrity and period and represents the ampaign finance critrity that Have examined this report including attacked schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance critrity that Have examined this report including attacked schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance critrity that Have examined this report including attacked schedules and it is, to the	8th day preceding preliminary 8th day preceding election	🗌 30 day	after election	year-end report [dissolution
Hanover School Committee Office Sought and District 710 Center St, Hanover MA 02339 Name of Committee Treasures Residential Address Committee Mailing Address E-mail:	Peter Quinn Miraglia				, 3. ⁶³² ⁴³
Office Sought and Datanct Name of Committee Treasurements of MGL c. 55. Plane 8: Name of Datak(s) used: Image of the sequence o		-	Co	ommittee Name	202
710 Center St, Hanover MA 02339 E-mail: petermiraglia@gmail.com Phone # (optional): Committee Mailing Address Phone # (optional): Phone # (optional): SUMMARY BALANCE INFORMATION: Image: Committee Mailing Address Line 1: Ending Balance from previous report 0 Line 2: Total receipts this period (page 3, line 11) 155.78 Line 3: Subtotal (line 1 plus line 2) 155.78 Line 4: Total expenditures this period (page 6, line 14) 0 Line 5: Ending Balance (line 3 minus line 4) 0 Line 6: Total (all) outstanding liabilities (page 7) 0 Line 8: Name of bank(s) used: Image: Committee Treasurer: Certify, 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 persona seting udder the authority or on bahalf of this committee in accordance with the requirements of M.G.L. c. 53. Signed under the penditors of perjury: Creasurer's signature) Date: Certify that 1 have examined this report including stached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including persons acting udder the authority or on bahalf of this committee in accordance with the requirements of M.G.L. c. 5		-	Name of	Committee Tressurer	
Residential Address Committee Mailing Address Committee Mailing Address Phone # (optional):			Name of		
E-mail: petermireglia@gmail.com Phone # (optional): E-mail: Finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. e. 55. The ending finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. e. 55. The ending finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. e. 55. The ending finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. e. 55. The ending finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. e. 55. The ending finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. e. 55. The ending finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. e. 55. The ending finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. e. 55. The ending finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. e. 55. The ending finance activity of all persons acting under the authority or on behalf of this commit		-	Commit	tee Mailing Address	dauga la
Phone # (optional): Phone # (optional):Phone # (optional):Phone # (optional):Phone #	E-mail: petermiraglia@gmail.com	E-mail:			7
SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report 0 Line 2: Total receipts this period (page 3, line 11) 155.78 Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) 155.78 Line 5: Ending Balance (line 3 minus line 4) 0 Line 6: Total in-kind contributions this period (page 6) 0 Line 7: Total (all) outstanding liabilities (page 7) 0 Line 8: Name of bank(s) used:	Phone # (optional):	Phone # (optional):		2 2
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Line 3: Subtotal (line 1 plus line 2) 155.78 Line 4: Total expenditures this period (page 5, line 14) 155.78 Line 5: Ending Balance (line 3 minus line 4) 0 Line 6: Total in-kind contributions this period (page 6) 0 Line 7: Total (all) outstanding liabilities (page 7) 0 Line 8: Name of bank(s) used: 0 Arfidavit of Committee Treasurer: 0 certify that 1 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 entivity, 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. e. 55. Date: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) Date: Date: Candidate with Committee In accordance with the requirements of M.G.L. e. 55. In Ave not received any contributions, incurred any expenditures on my behalf of this committee in accordance with the requirements of M.G.L. e. 55. Candidate with Committee Candidate: (check 1 box only) Date: Cardidate with Committee Cardidate: (check 1 box only) Cardidate with examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of al	Line 1: Ending Balance from previous report			0	first
Line 4: Total expenditures this period (page 5, line 14) 155.78 Line 5: Ending Balance (line 3 minus line 4) 0 Line 6: Total in-kind contributions this period (page 6) 0 Line 7: Total (all) outstanding liabilities (page 7) 0 Line 8: Name of bank(s) used: 0 Affdavit of Committee Treasurer: 0 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 extivity, including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance extivity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. e. 55. Signed under the penalties of perjury:	Line 2: Total receipts this period (page 3, line 1)	1)		155.78	ryperi
Line 5: Ending Balance (line 3 minus line 4) 0 Line 6: Total in-kind contributions this period (page 6) 0 Line 7: Total (all) outstanding liabilities (page 7) 0 Line 8: Name of bank(s) used: 0 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 treativity, 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:	Line 3: Subtotal (line 1 plus line 2)			155.78	5/5/2
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Line 7: Total (all) outstanding liabilities (page 7)	Line 5: Ending Balance (line 3 minus line 4)			0	Via.
Affidavit of Committee Treasurer: 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 M.G.L. c. 55. Signed under the penalties of perjury:	Line 6: Total in-kind contributions this period (p	bage 6)		0	emai
Affidavit of Committee Treasurer: 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 M.G.L. c. 55. Signed under the penalties of perjury:(Treasurer's signature) Date: 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. 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. 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.L. c. 55.	Line 7: Total (all) outstanding liabilities (page 7))		0	
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 M.G.L. c. 55. Signed under the penalties of perjury: Date:	Line 8: Name of bank(s) used:				
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 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. 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.L. c. 55. 			(Treasurer's signa	ture) Date.	
 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. 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.L. c. 55. 	FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 h	oox only)			
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.L. c. 55.	I certify that I have examined this report including attached schedules and it is, to th activity, of all persons acting under the authority or on behalf of this committee in a	accordance with	the requirements of M.G.	L. c. 55. I have not receive	f all campaign finance ed any contributions,
Signed under the penalties of perjury: Peter Miraglia (Candidate's signature) Date: May 5, 2023	I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement	its, in-kind cont	ributions and liabilities for	this reporting period and r	f all campaign epresents the
	Signed under the penalties of perjury: <u>Peter Miraglia</u>		(Candidate's signa	ature) Date: May	5, 2023

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.)

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
Apr 10, 2023	Peter Miraglia, 710 Center St.	155.78	
Line 9: Total Receipts over \$50 (or listed above)		155.78	
Line 10: Total Rece	ipts \$50 and under* (not listed above)	0	
Line 11: TOTAL F	RECEIPTS IN THE PERIOD	155.78	← 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)
		2	
Line 9: Total Recei	pts over \$50 (or listed above)	0	
Line 10: Total Rece	ipts \$50 and under* (not listed above)	0	
Line 11: TOTAL F	RECEIPTS IN THE PERIOD	0	← 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.)

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Apr 10, 2023	Lowe's	108 Old Church St, Pembroke, MA	Campaign Sign Materials	155.78
	~			
		Line 12: Total Expenditures ov	er \$50 (or listed above)	155.78
		Line 13: Total Expenditures \$50) and under* (not listed above)	0
	Enter on page 1, line 4 \rightarrow	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	155.78

* 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		Address		Amount
		[]		
		Line 12: Expenditures over \$50) (or listed above)	0
Line 13: Expenditures \$50 and under* (not listed above)				
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	0

* 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
		Line 15: In-Kind Contributions	over \$50 (or listed above)	0
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Enter on page 1, line $6 \rightarrow$ Line 17: TOTAL IN-KIND CONTRIBUTIONS			ONTRIBUTIONS	0

* 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.

Date Incurred	To Whom Due	Address	Purpose	Amount	
				-	
Enter on page 1, line 7 \rightarrow Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)					