

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 4/3	36/3023 Ending Date: 6-12-2023
Type of Report: (Check one)	₩
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Phonon L. Nymon	C.T.E. Ahonon Nymm
Candidate Full Name (if applicable) Himover Select BOARD	C.T.E. Bhonda Nymm Committee Name Bober F. Mahoney Name of Committee Treasurer
Office Sought and District 30 King Phillip Lime Amoure Residential Address	Name of Committee Treasurer 20 King Phillip Line I-lanous Committee Mailing Address E-mail: Phondanymm @ ynhu. com
Residential Address E-mail: Bhandanumm @ Unhoo, ccm	Committee Mailing Address
E-mail: Rhondanymm @ ynhoo. com Phone # (optional): 181-826-6065	Phone # (optional): 1/2/- 826 - 6065
1 Holle II (Optional). 1781 - 826 - 6:063	Thomas (optional). 7 27 - 226 - 6063
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	377.75
Line 2: Total receipts this period (page 3, line 11)	300 00
Line 3: Subtotal (line 1 plus line 2)	577.75
Line 4: Total expenditures this period (page 5, line	e 14)
Line 5: Ending Balance (line 3 minus line 4)	577.75
Line 6: Total in-kind contributions this period (pa	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	3423.78
Line 8: Name of bank(s) used: Sockland	D Trust Company
Affidavit of Committee Treasurer:	
I certify that I have examined this report including attuched schedules and it is to the best activity, including all contributions, loans, receip or expenditures, disbursements, in-kind of finance activity of all persons acting under the authority of on behalf of this committee in	contributions and liabilities for this reporting period and represents the campaign
Signed under the penalties of perjury:	(Treasurer's signature) Date: 6-8-3023
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	x only)
	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, a 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 finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this signed under the penalties of perjury:	s, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature)

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)
1-6-3023	Rhanda Nyman	100.00	
4-7-2023	WALTER DIXON 121 HAMOVER St. HAMVER	200.00	TAX Preparer
Line 9: Total Receip	ots over \$50 (or listed above)	300,00	
Line 10: Total Recei	pts \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD	300.00	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

N-4-70 **	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
		- Control of the Cont		
		As an		
			in desired	
			- Company of the Comp	
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			di un management di un	
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		and the state of t		
		T. 10 F 17		
		Line 12: Total Expenditures	over \$50 (or listed above)	0
		T: 12 T-4-1T 14 0	50 1 1 4 (اره
		Line 13: 10tal Expenditures \$	50 and under* (not listed above)	0
		Line 14: TOTAL EXPENDI		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. Page 4

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)		over \$50 (or listed above)	0
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	0
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	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.

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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.

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Date Incurred	To Whom Due	Address	Purpose	Amount
3/19/2020	VISA Print	275 Wymon STREET WM Thom	Business CARDS	24,21
3/28/2022	Moss Dem	11 Bencen Gr. Boston	YOFE builder	580
3/23/2020	Venuex Medin	35 Vera Drive Bridgewiere	Web page and email neer	636:08
5/5/2020	STEVE Dirrey	in Temple Rund Morsinfield	Adversing MAD Vorchulder	500
5/5/2030	Town of Hanson	550 Homover St.	Sign permit	5.00
5/9/2020	U.S.P.S.	1405 Homover St	Posmae	53,8,00
6/3/3030	TAYgeT	385 Center Ave	Chmpnigh	138.94
5/18/2020	Prinning Unlimited	63 Plymorth St.	Polineal signs	1090.65
Act as a management of the control o				
		T. 40 MORAY OXIMOMARIA	TELO E EL MOTO MOTORO (ANTA)	4444

Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)