

Form CPF M 102: Campaign Finance Report **Municipal Form** Office of Campaign and Political Finance IN GF MANNEY

Commonwealth of Massachusetts	File with: City or Rown Clerk or Election Commission 1. 2022 Ending Date: Dec 31, 2022
Fill in Reporting Period dates: Beginning Date: Jan	1, 2022 Ending Date: Dec 31, 2022
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution
Vanessa A. O'Connor	Committee to Elect Vanessa O'Connor
Candidate Full Name (if applicable)	Committee Name
Select Board, Hanover	Lauren Monuel
Office Sought and District	Name of Committee Treasurer
43 Mayflower Circle, Hanover, MA 02339 Residential Address	43 Mayflower Circle, Hanover, MA 02339
E-mail: oconnorforselectwoman@gmail.com	Committee Mailing Address E-mail: oconnorforselectwoman@gmail.com
Phone # (optional): (781) 296-7029	Phone # (optional): (781) 296-7029
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	24.44
Line 2: Total receipts this period (page 3, line 11	0
Line 3: Subtotal (line 1 plus line 2)	24.44
Line 4: Total expenditures this period (page 5, lin	ne 14) 0
Line 5: Ending Balance (line 3 minus line 4)	24.44
Line 6: Total in-kind contributions this period (p	page 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: Rockland Federal C	Credit Union
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best 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 Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be Candidate with Committee) I certify that I have examined this report including attached schedules and it is, to the persons acting under the authority or on behalf of this committee in a strivity of all persons acting under the authority or on behalf of this committee in a strivity of all persons acting under the authority or on behalf of this committee in a strivity of all persons acting under the authority or on behalf of this committee in a strivity of all persons acting under the authority or on behalf of this committee in a strivity of all persons acting under the authority or on behalf of this committee in a strivity of all persons acting under the authority or on behalf of this committee.	d contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: Jan 16, 2023 Dox only) 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 a incurred any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee	accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ng period that are not otherwise disclosed in this report.
I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	ats, in-kind contributions and liabilities for this reporting period and represents the his candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature) Date: Jan 16, 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)
		Professional Control of the Control	
			[]
	,		
	ots over \$50 (or listed above)		
ne 9: Total Receir			I .
ne 9: Total Receip	5ts 6ver \$50 (6r risted above)		
	pts \$50 and under* (not listed above)		

^{*} 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 (alphabetical listing required) Amount (for contributions of \$200 or more) Amount (for contributions of \$200 or more)		Name and Residential Address		Occupation & Employer
	Date Received		Amount	(for contributions of \$200 or more)
			parameter and a second control of the second	
ing Or Total Descripts even \$50 (on listed shave)	Lina Or Tatal Dans	mta avan \$50 (an listed share)		
ine 9: Total Receipts over \$50 (or listed above)	Line 9: 1 otal Kecei	pts over \$50 (or fisted above)		
ine 10: Total Receipts \$50 and under* (not listed above)	Line 10: Total Rece	ipts \$50 and under* (not listed above)		
in 11. TOTAL DECEIPTS IN THE DEDICE	Time 11. PROPERTY	DECEIDTS IN THE DEDICE		
ine 11: TOTAL RECEIPTS IN THE PERIOD O 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.				1

^{*} 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.)

chorr an exhenn	To Whom Paid	nittee name and a page number on	reacti page.	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
				process relatives to the second secon
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				Manager and a second se

THE PROPERTY OF THE PROPERTY O				
		Line 12: Total Expenditures ov	er \$50 (or listed above)	
		T 1 12 T 1 1 T 1 1 1 1 1 1 1 1 1 1 1 1 1	0 - 1 - 1 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4	
		Line 13: Total Expenditures \$50	u and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	
		include them in line 12. Line 13 sl		

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

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SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
			11	
*				
			11	
		T 10 T 11. 0.50		
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and t	under* (not listed above)	
		The rest with the rest of the	(1100 110104 40040)	
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	0
		include them in line 12. Line 13 sl		

^{*} 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.

	- W - D - 1 14			
Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	pennolectron	F		
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$	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.

Date Incurred	To Whom Due	Address	Purpose	Amount
	-			