

Form CPF M 102: Campaign Finance Report

RECEIVED Municipal Form NORTON TOWN CLERK Office of Campaign and Political Finance

2021 APR 12 AM 10: 48

				File with: City or	Town Clerk	or Election Commission
Fill in Reporting Period dates:	Beginning Date:	4-8-2	Z/ Ending I	Date: 4	-10.	-2/
Type of Report: (Check one)			- , _	·		
	8th day preceding election	77 20 day		· 1		
our day preceding premimary	oth day preceding election		after election	year-end		dissolution
				· · · · · · · · · · · · · · · · · · ·		CONTINUED Plot QUESKA
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Candidate Full Name (if a	pplicable)		المسجد ا	Committee Nar	ne	
0.55 - 5 - 14 - 17		- 190	DERT W.	(ZIMBUL)	C JE	
Office Sought and Di	Strict					
Residential Addre	256	_	PINES	ommittee Mailing		VII (A
E-mail:	33	E-mail:		_		,
"stratur "			SELECTA	•		
Phone # (optional):		Phone # (c	ptional): <u>50 8</u>	7-285-36	:3/	
	SUMMARY BALAN	(CE INFO	RMATION:			
Line 1: Ending Balanc	e from previous report			82,70)	
Line 2: Total receipts t	this period (page 3, line 1	.1)		27.30	<u></u>	
Line 3: Subtotal (line 1 plus line 2)			110.00			
Line 4: Total expenditures this period (page 5, line		line 14)	110.00			
Line 5: Ending Balanc	e (line 3 minus line 4)			X		
Line 6: Total in-kind c	contributions this period (page 6)	THE CONTRACTOR OF THE CONTRACT	と		
Line 7: Total (all) outstanding liabilities (page 7)				D	Privile	
Line 8: Name of bank((s) used: Worth (=	aston S	A VUIGO	BANK		
Affidavit of Committee Treasurer:						
I certify that I have examined this report including at	ttached schedules and it is, to the b	est of my knowle	edge and belief, a tr	ie and complete sta	atement of a	all campaign finance
activity, including all contributions, loans, receipts, of finance activity of all persons acting under the autho	expenditures, disbursements, in-kir	nd contributions	ınd liabilities for thi	s reporting period:	and represer	nts the campaign
Signed under the penalties of perjury:	-114 (136 Jan 101	e in accordance w	·		Date: 0	4-12-21
C	di co de cauce		(Treasurer	s signature)		4 12 2(
FOR CANDIDATE FILINGS ONLY:	Amdavit of Candidate: (check l	box only)				
Candidate with Committee and no activity in I certify that I have examined this report includi activity, of all persons acting under the authority incurred any liabilities nor made any expenditure	ing attached schedules and it is, to y or on behalf of this committee in	accordance with	nowledge and belief the requirements of	, a true and comple f M.G.L. c. 55. I h	te statemen ave not rece	nt of all campaign finance
Candidate without Committee OR Candidate I certify that I have examined this report includi finance activity, including contributions, loans, campaign finance activity of all persons acting to	ing attached schedules and it is, to receipts, expenditures, disburseme	the best of my keents, in-kind cont	nowledge and belief	ties for this reporting	ng period an	nd represents the
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 (for contributions of \$200 or more)
4/1/21	Rollort W KLINISALL Je 57 PIACE ST NORTON	27.30	SEIF EMPLOYED RETURNED
Line 9: Total Rece	ipts over \$50 (or listed above)	J L	
Line 10: Total Reco	eipts \$50 and under* (not listed above)	2730	
	RECEIPTS IN THE PERIOD	27.30	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)
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THE THE STATE OF T			
Line 9: Total Rece	ipts over \$50 (or listed above)	\(\sqrt{2}	
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD	à	Enter on page 1, line 2
	d receipts of \$50 and under include them in lin	C T: 10 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.)

	To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
4-8-21	US PS -5774 UYD 1	5 thousan Aus	110.00			
	The second secon					
58Nii - Nii						
	The state of the s					
				The state of the s		
Line 12: Total Expenditures over \$50 (or listed above)				110100		
Line 13: Total Expenditures \$50 and under* (not listed above)						
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT		110.00		

^{*} 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)

Line 12: Expenditures ver \$50 (or fisted above) Line 13: Expenditures \$50 and under* (not listed above)	Date Paid	To Whom Paid (alphabetical listing)	Address	Daywar of Francisco	
	Dawraiu	(arphavenear nating)	Auuress	Purpose of Expenditure	Amount
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		/		7	
		<i>V</i>			
			Line 12. Evener diturn) (!:	
Line 13: Expenditures \$50 and under* (not listed above)			Line 12. Expenditures over \$50	o (or listed above)	La
			Line 13: Expenditures \$50 and a	under* (not listed above)	
[
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD		Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	1 20

^{*} 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
				8
(March 1982)				
Language Control of the Control of t				
Line 15: In-Kind Contributions over \$50 (or listed above)			Ø	
Line 16: In-Kind Contributions \$50 & under (not listed above)				
	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			

^{*} 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
				8
Transmission and a second and a second and a second and a second a second and a second a seco				
Continuo				
] [Enter on page 1 line 7 →	Line 18: TOTAL OUTSTANI	DINC LIABILITIES (ATT)	