

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 01/	File with: City or Town Clerk or Election Commission 01/2019 Ending Date: 12/31/2019	
Type of Report: (Check one)		
	30 day after election X year-end report dissolution	
Scott W. Bichan		
Candidate Full Name (if applicable) Planning Board	Committee Name	
Office Sought and District 209 Bay Road, Norton MA 02766	Name of Committee Treasurer	
Residential Address E-mail: Scott.Bichan@gmail.com	Committee Mailing Address E-mail:	
Phone # (optional): 401-477-3246	Phone # (optional):	
SUMMARY BALANC	E INFORMATION:	
Line 1: Ending Balance from previous report	\$0.00	
Line 2: Total receipts this period (page 3, line 11)	\$0.00	
Line 3: Subtotal (line 1 plus line 2)	\$0.00	
Line 4: Total expenditures this period (page 5, line	\$0.00	
Line 5: Ending Balance (line 3 minus line 4)	\$0.00	
Line 6: Total in-kind contributions this period (pag	ge 6) \$0.00	
Line 7: Total (all) outstanding liabilities (page 7)	\$0.00	
Line 8: Name of bank(s) used:	N/A	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind or finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	ontributions and liabilitics for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55(Treasurer's signature) Date:	
L activity, of all persons acting under the authority or on behalf of this committee in acc incurred any liabilities nor made any expenditures on my behalf during this reporting	best of my knowledge and belief, a true and complete statement of all campaign finance ordance with the requirements of M.G.L. c. 55. I have not received any contributions, 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 I finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	in-kind contributions and liabilities for this reporting period and represents the	

Signed under the penalties of perjury:

Scott W. Bichan

(Candidate's signature)

Date: <u>11/05</u>/2019

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)
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Line 9: Total Receip	pts over \$50 (or listed above)		
Line 10: Total Recei	ipts \$50 and under* (not listed above)		
Line 11: TOTAL R	ECEIPTS 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.