

Signed under the penalties of perjury:

RECEIVE FORM CPF M 102: Campaign Finance Report TOWN OF WEYSOUTH TOWN CLERK'S OFFICE Municipal Form

Office of Campaign and Political Finance

2015 DET 26 AM 9: 27

| of Massachusetts | | | | File with | n: City or Town Cleri | k or Election C | Commission |
|--|--|--|--|--|--|--|------------------------|
| Fill in Reporting Period dates: Beginning Date: | 1/1/20 |)15 | Ending | | 10/16/2015 | | |
| Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding elections. | ion [| 30 day | after election | | year-end report | dissolu | ıtion |
| Becky Haugh | | Commit | tee to Elect Be | cky Haı | ıgh | | |
| Candidate Full Name (if applicable) | | | | Com | mittee Name | | |
| Town Councilor - District 1 | | Christa I | Dunn | | · · · · · · · · · · · · · · · · · · · | | |
| Office Sought and District | | | Na | ame of Co | ommittee Treasurer | | |
| 34 Evans Street, Weymouth, MA 02191 | | 56 Holbi | rook Road, We | | | | |
| Residential Address | | | C | Committee | e Mailing Address | | |
| Telephone Number (optional): | | Telephone | Number (optional) |): | | | |
| SUMMARY BALA | ANCE | E INFOF | RMATION: | | | | |
| Line 1: Ending Balance from previous report | t | | | | 428.7 | 77 | |
| Line 2: Total receipts this period (page 3, lin | ne 11) | Constant | | | 1,00 | 00 | |
| Line 3: Subtotal (line 1 plus line 2) | | | | | 1,428.7 | 77 | |
| Line 4: Total expenditures this period (page | 5, line | 14) | | | 3: | 25 | |
| Line 5: Ending Balance (line 3 minus line 4) |) | | | | 1,103.7 | 77 | |
| Line 6: Total in-kind contributions this perio | od (pag | e 6) | | | | 0 | |
| Line 7: Total (all) outstanding liabilities (page | ge 7) | | | | | o | |
| Line 8: Name of bank(s) used: South Shore B | 3ank | | | | | | |
| Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the activity, including all contributions, loans, receipts, expenditures, disbursements, in finance activity of all persons acting under the authority of on behalf of this commits signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is incurred any liabilities nor made any expenditures on my behalf during this recandidate without Committee OR Candidate with independent activity for I certify that I have examined this report including attached schedules and it is | n-kind contittee in acceptance to the box of | only) mest of my knordance with the ordance with the ore | nd liabilities for the the requirement(Treasurer | is reporting of M.G. 's signature f, a true and M.G.L. | ng period and represe L. c. 55. The Date: Indicate: Indinate: Indicate: Indicate: Indicate: Indicate: Indicate: | 20/26/2015 10/26/2015 Int of all campai eived any conti | ign finance ributions, |
| finance activity, including contributions, loans, receipts, expenditures, disburs campaign finance activity of all persons acting under the authority or on behal | | | | | | | he |

Date: 10/26/2015

(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.)

| | Name and Residential Address | Occupation & Employer | | | |
|--|---|-----------------------|--|--|--|
| Date Received | (alphabetical listing required) Amoun | | (for contributions of \$200 or more) | | |
| | Haugh, Rebecca | | Accounting Clerk | | |
| 5/24/2015 | 34 Evans Street Weymouth, MA 02191 | 1,000 | Pilgrim Area Collaborative - Pembroke, MA | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| *************************************** | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| ************************************** | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| шине положения и положения | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| ine 9: Total Recei | ipts over \$50 (or listed above) | 1,000 | | | |
| ine 10: Total Rece | sipts \$50 and under* (not listed above) | 0 | | | |
| | RECEIPTS IN THE PERIOD | 1,000 | An Training to the Control of the Co | | |
| | receipts of \$50 and under include them in line | <u> </u> | | | |

^{*} 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.)

| eport 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 | |
| 7/9/2015 | Old Colony Running Events | 3 Winstead Road Weymouth, MA 02189 | Run Weymouth Race Series Sponsorship | 100 | |
| 6/26/2015 | Town of Weymouth | 75 Middle Street Weymouth, MA 02189 | Fourth of July Committee; Bus Sponsorship | 50 | |
| 6/24/2015 | Vote Yes for Weymouth | P.O. Box 300 Weymouth, MA 02188 | PAC contribution | 100 | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | Line 12: Total Expenditures ov | ver \$50 (or listed above) | 250 | |
| Line 13: Total Expenditures \$50 and under* (not listed above) | | | | 75 | |
| | Enter on page 1, line 4 → | Line 14: TOTAL EXPENDIT | TURES IN THE PERIOD | 325 | |

^{*} 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.

| 0 |
|---|
| 0 |
| 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 |
|---|--------------------------|------------------------|------------------------|--|
| | | | | |
| | | | | Part I I I I I I I I I I I I I I I I I I I |
| nos examples examples | | | | |
| | | | | |
| *************************************** | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | <u>F</u> | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | Enter on page 1 line 7 → | Line 18: TOTAL OUTSTAN | DING LIABILITIES (ALL) | 0 |