

Form CPF M 102: Campaign Finance Report Municipal Form

2027 JAN 26 PM 12: 32 Office of Campaign and Political Finance

| File with: City or Town Clerk or Election Commi | | | | | | | | |
|---|--|-----------------------------------|--|--|--|--|--|--|
| Fill in Re | eporting Period dates: Beginning Date: 10 | 0/25/2021 | Ending Date: 12/31/2021 | | | | | |
| Type of | Report: (Check one) | | | | | | | |
| | | | | | | | | |
| ■ 8th day preceding preliminary ■ 8th day preceding election ■ 30 day after election ■ year-end report ■ dissolution | | | | | | | | |
| | | | | | | | | |
| Frederick | J Happel Jr Candidate Full Name (if applicable) | _ Com | Committee To Elect Fred Happel Committee Name | | | | | |
| Councilor at Large | | | Joe DiCesare | | | | | |
| | Office Sought and District | | Name of Committee Treasurer | | | | | |
| 54 Wright | t St Weymouth MA 02190 | 54 W | 54 Wright St Weymouth MA 02190 | | | | | |
| E-mail: | Residential Address | Emil | Committee Mailing Address | | | | | |
| | jheire@comcast.net | E-mail | | | | | | |
| Phone # (opt | nonal): | Phone | #(optional): | | | | | |
| | | | | | | | | |
| | SUMMARY BALAI | NCE INF | ORMATION: | | | | | |
| | Line 1: Ending Balance from previous report | | 11,015.23 | | | | | |
| | | | | | | | | |
| | Line 2: Total receipts this period (page 3, line 11) | | \$200 | | | | | |
| | | | | | | | | |
| | Line 3: Subtotal (line 1 plus line 2) | | . 11,215.23 | | | | | |
| | Line 4: Total expenditures this period (page 5, line 5: Ending Balance (line 3 minus line 4) | | 6566.97 | | | | | |
| :0 | | | \$4448.26 | | | | | |
| | Line 6: Total in-kind contributions this period | (page 6) | 0 | | | | | |
| | Line 7: Total (all) outstanding liabilities (page 7) | | 0 | | | | | |
| | | | | | | | | |
| | Line 8: Name of bank(s) used: Eastern Bank | | | | | | | |
| Affidavit of f | Committee Treasurer: | | | | | | | |
| L certify that I | have examined this report including attached schedules and it is, to the | best of my kno | wledge and belief, a true and complete statement of all campaign finance | | | | | |
| activity, inclu finance activi | iding all contributions, loans, receipts, expenditures, disbursements, in-ki ity of all persons acting under the authority or on behalf of this committee | ind contributio e in accordanc | ns and liabilities for this reporting period and represents the campaign with the requirements of M.G.L. c. 55. | | | | | |
| Signed under the penalties of perjury: | | | | | | | | |
| FOR CAN | DIDATE FILINGS ONLY: Affidavit of Candidate: (check I | t box only) | | | | | | |
| | ate with Committee | | | | | | | |
| I certify that I have examined this report including attached schedules and it is, to 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 accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting 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 best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55. | | | | | | | | |

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.)

| Date Paid | To Whom Paid (alphabetical listing) | Address | Purpose of Expenditure | Amount |
|------------|-------------------------------------|---|----------------------------------|-----------|
| 10/30/2021 | Printing Unlimited | 63 Plymouth St ' Holbrook MA 02343 | Printing | \$4583.22 |
| 11/2/2021 | Olympic Pizza | Union St South Weymouth MA 02190 | election nights | \$800 |
| 11/8/2021 | Fred Happel | 54 wright st weymouth ma 02190 | reimbursement | 963.75 |
| 11/10/2021 | Sheriff Patrick McDermott | Dixwell St Quincy MA 02169 | Camapign Contribution | \$50.00 |
| 12/13/2021 | Life Storage | Washington St Weymouth MA 02189 | Storage Locker | \$200 |
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| | | | | |
| | | Line 12: Total Expenditures over \$50 (or listed above) | | 6,566.97 |
| | Posts 1 F A s | Line 13: Total Expenditures \$ Line 14: TOTAL EXPENDI | 50 and under* (not listed above) | 6566.97 |

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) |
|---------------------|--|---------------------------|--|
| 10/29/2021 | Timothy O'Leary 92 Lambert Ave Weymouth MA 02189 | \$100 | |
| 10/29/2021 | James Barret 133 Sheri Ln Weymouth MA 02190 | \$100 | |
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| Line 9: Total Recei | pts over \$50 (or listed above) | = | |
| Line 10: Total Rece | ipts \$50 and under* (not listed above) | - | |
| Line 11: TOTAL R | RECEIPTS IN THE PERIOD | ← Enter on page 1, line 2 | |