

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 01/01	/2023 Ending Date: 10/30/2023
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	
ath day preceding premininary and day preceding election	30 day after election year-end report dissolution
John Abbott	Committee to Elect John Abbott
Candidate Full Name (if applicable) District 6 Town Council	Committee Name Sarah Abbott
Office Sought and District	Name of Committee Treasurer
428 Pond Street, Weymouth, MA 02190	428 Pond Street, Weymouth, MA 02190
Residential Address	Committee Mailing Address
E-mail: johnabbott36@gmail.com	E-mail: johnabbott36@gmail.com
Phone # (optional):	Phone # (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	130.83
Line 2: Total receipts this period (page 3, line 11)	870
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, line	e 14) 430.13
Line 5: Ending Balance (line 3 minus line 4)	570.7
Line 6: Total in-kind contributions this period (page	ge 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: Coastal Heritage Bar	nk
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 of 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 Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditure, dishursements, campaign finance activity of all persons acting under the authority of penalty of this	ontributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 10/30/2023 k only) best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period that are not otherwise disclosed in this report. best of my knowledge and belief, a true and complete statement of all campaign in-kind contributions and liabilities for this reporting period and represents the scandidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature) Date: 10/30/2023

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received		Amount	(101 CONTINUED OF \$200 CF More)
	See attached		
ine 9: Total Rece	ipts over \$50 (or listed above)	870	
			-
Line 10: Total Rec	eipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD	870	← Enter on page 1, line 2

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
ine 9: Total Receip	ots over \$50 (or listed above)		
ine 10: Total Recei	pts \$50 and under* (not listed above)		
ine 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.

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.)

<u> </u>	ditures. Please include your comm To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
05/10/2023	Weymouth Cal Ripken Baseball	Negus Park, Pond Street, Weymouth, MA 02190	League Sponsorship	300
08/29/2023	Weymouth Irish Heritage Day	400 Union Street, Weymouth, MA 02190	Parade Fee	100
L				
		Line 12: Total Expenditures	over \$50 (or listed above)	400
		Line 13: Total Expenditures \$	350 and under* (not listed above)	30.13
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	430.13

^{*} 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
		L		
				22 manual mengani
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and u	under* (not listed above)	
	Enter on wass 1 lims 4	Line 14. TOTAL EVDENDUT	HDEC IN THE DEDICA	
		Line 14: TOTAL EXPENDIT		

^{*} 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		
		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 →	Line 17: TOTAL IN-KIND C	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
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	

Schedule A: Receipts

Occupation & Employer	0	0	0	0	0	0	0	0	0	0		
Amount	\$ 50.00	100.00	20.00	100.00	100.00	100.00	150.00	100.00	100.00	50.00	00 020	0.0
Am	\$	\$	\$	Ş	Ş	\$	\$	Ş	❖	❖	40	Դ
Date Received Name and Residential Address	1/9/2023 Therese Holbrook, 200 Trotter Road, Weymouth, MA 02109	1/10/2023 John Burke, 46 St. Theresa Ave, Boston, MA 02132	1/10/2023 David Scannell, 26328 Deep Creek Blvd, Punta Gorda, FL 33983	1/10/2023 Molly Bryan, 2506 N. Washtenaw Ave, Chicago, IL 60647	2/1/2023 David Scannell, 565 Franklin St, Reading, MA 01867	2/8/2023 Elizabeth Burke, 46 St. Theresa Ave, Boston, MA 02132	3/26/2023 Molly Abbott, 38 Bridge Street, Medfield, MA 02052	7/1/2023 Patrick Driscoll, 25 Oxbow Rd, Lynnfield, MA 01940	9/12/2023 Molly Bryan, 2506 N. Washtenaw Ave, Chicago, IL 60647	9/13/2023 Donna Flynn, 61 White St., Weymouth, MA 02190		l'Otali.