

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth					40
of Massachusetts		File with	v. City or Town Cl	B.	lection Commission
Fill in Reporting Period dates: Beginning Date: 1/1/2	3	Ending Date:	10/30/23	erk-of E	lection Commission
Type of Report: (Check one)				5	Andrew Street,
8th day preceding preliminary 8th day preceding election	30 day afte	er election	ear-end report		dissolution
				S	젊크
Maureen B. Kiely Candidate Full Name (if applicable)	Committee	to Elect Maureen K	iely mittee Name		
District Two Town Council	John F. Kie		141110		
Office Sought and District			ommittee Treasurer		
10 Vine Street, Weymouth, MA 02188	10 Vine Str	eet, Weymouth, MA			
Residential Address			Mailing Address		
E-mail: maureen.kiely@maritime.edu	E-mail:	votem	okiely@gmail.c	om	
Phone # (optional):	Phone # (option	nal):			
SUMMARY BALANC	E INFORM	IATION:			
Line 1: Ending Balance from previous report			3583	3.26	
Line 2: Total receipts this period (page 3, line 11)			1155	.00	
Line 3: Subtotal (line 1 plus line 2)			4738	3.26	
Line 4: Total expenditures this period (page 5, line	e 14)		1431	.82	
Line 5: Ending Balance (line 3 minus line 4)			3306	.44	
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: TD Bank Weymouth					
Affidavit of Committee Treasurer: It 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 confinance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:	ontributions and I	labilities for this reporting	g period and repres	sents the	campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	(only)				
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the lactivity, of all persons acting under the authority or on behalf of this committee in accinicurred any liabilities nor made any expenditures on my behalf during this reporting personal certify that I have examined this report including attached schedules and it is, to the lefinance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	period that are not best of my knowle in-kind contributi	requirements of M.G.L. of otherwise disclosed in the degree and belief, a true and one and liabilities for this	c. 55. I have not re his report. d complete stateme is reporting period a	ceived a ent of all	ny contributions,
Signed under the penalties of perjury:		(Candidate's signatur	Date:		/23

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)
9/12/23	Pam Pantermoller 24 Webb St Weymouth, MA 02188	190.00	
9/12/23	Anne Welch 19 Hyde St Weymouth, MA 02188	50.00	
9/12/23	Richard Staiti Burns Ave Canton, MA 02021	25.00	
9/12/23	Jerome McDermott P.OI Box 354 West Dennis, MA	100.00	
9/12/23	Mary Ryan 121 Concord St Rockland, MA 02370	50.00	
9/12/23	Richard Ryan 12 Delorey Ave Weymouth, MA 02191	100.00	
9/12/23	Barbara Sutherby 12 Eastman Ave Foxboro, MA	50.00	
9/12/23	Theresa O'Connor 87 Knollwood Circle Weymouth, MA 02169	100.00	
9/12/23	Donna Reed 26 Harborvilla Ave Braintree, MA 02184	50.00	
9/12/23	Nina La4occo 4D Emerson St East Weymouth, MA 02189	25.00	
9/18/23	IBEW Local Union 103 256 Freeport Street Dorchester, MA 02122	500.000	Union Donation
Line 9: Total Rece	ipts over \$50 (or listed above)	1150.00	
Line 10: Total Rece	eipts \$50 and under* (not listed above)	5.00	
Line 11: TOTAL 1	RECEIPTS IN THE PERIOD	1155.00	← 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)
			The state of the state of
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	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2
* If you have itemized	receipts of \$50 and under, include them in line		

^{*} 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
1/25/23	Campaign Partner		webiste	29.0
1/31/23	TD Bank		bank fee	3.00
2/27/23			website	29,00
2/28/23			bank fee	3.00
3/27/23			website	29,00
3/31/23			bank fee	3.00
4/25/23			website	29.00
4/27/23			bank fee	3.00
5/25/23			Website	29.00
5/31/23			Bank fee	3.00
5/26/23			website	29.00
5/30/23			bank fee	3.00
		Line 12: Total Expenditure	s over \$50 (or listed above)	
		Line 13: Total Expenditures	s \$50 and under* (not listed above)	
	Enter on page 1 line 1 →	Line 14: TOTAL EXPEN	NITHERS IN THE DEDICE	

^{*} 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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
7/25/23			Website	29.00
				2510
7/31/23			bank fee	3.00
8/25/23			website	29.00
8/31/23			bank fee	3.00
9/5/23	Eastcoast Press	5 Keith Way, Hingham	printer fee	158.13
9/8/23	Amazon		supplies	34.95
9/11/23	Amazon		parade giveaway and fundraising items	374.44
9/11/23	Amazon		parade giveaway	10.99
9/11/23	Amazon		parade giveaway	10.50
9/19/23	Weymouth Irish Heritage Day		parade fee	100.00
9/12/23	Walmart		soda/water for fundraiser	77.81
10/25/23			website	29.00
10/30/23	Balor LLC (fuel america)		food for fundraising event	380.00
		Line 12: Expenditures over	\$50 (or listed above)	1431.82
		Line 13: Expenditures \$50 a	and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPEN	DITURES IN THE PERIOD	1431.82

^{*} 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 $6 \rightarrow$	→ 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
11	,			
		Line 18: TOTAL OUTSTAND		