

Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Brance 3: 05

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| Fill in Reporting Period dates: Beginning Date: 10/ | File with: City or Town Clerk or Election Commission 31/2023 Ending Date: 12/31/2023 |
| Type of Report: (Check one) 8th day preceding preliminary Sth day preceding election | 30 day after election year-end report dissolution |
| H. Richard Coughlin | Coughlin Committee |
| Candidate Full Name (if applicable) Councilor-at-Large | Committee Name James Parker |
| Office Sought and District 30 Veronica Lane, Weymouth, MA 02189 | Name of Committee Treasurer PO Box 146, Weymouth, MA 02188 |
| Residential Address E-mail: Rick.Coughlin@verizon.net | Committee Mailing Address E-mail: Rick.Coughlin@verizon.net |
| Phone #: | Phone #: |
| SUMMARY BALANC | T INFORMATION. |
| | |
| Line 1: Ending Balance from previous report | \$2,268.99 |
| Line 2: Total receipts this period (page 3, line 12) | \$ 375.00 |
| Line 3: Subtotal (line 1 plus line 2) | \$2,643.99 |
| Line 4: Total expenditures this period (page 5, line 15) | \$ 989.99 |
| Line 5: Ending Balance (line 3 minus line 4) | \$1654.00 |
| Line 6: Total in-kind contributions this period (page 6, 1 | ine 18) \$ 0.00 |
| Line 7: Total (all) outstanding liabilities (page 7, line 19 | |
| Line 8: Total out-of-pocket expenses this period (page 8, | line 22) \$ 12.53 |
| Line 9: Name of bank(s) used: Coastal Heritage | e Bank |
| Affidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is to the best octivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind coinance activity of all persons acting under the authority or on behalf of this committee in acting under the penalties of perjury: | coordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 01/22/2024 |
| OR CANDIDATE FILINGS ONLY: anidavit of Candidate: (check 1 box of | only) |
| Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the be activity, of all persons acting under the authority or on behalf of this committee in according any liabilities nor made any expenditures on my behalf during this reporting persons acting under the authority or on behalf during this reporting persons acting the second | est of my knowledge and belief, a true and complete statement of all campaign finance redance with the requirements of M.G.L. c. 55. I have not received any contributions, |
| I certify that I have examined this report including attached speciales and it is, to the be finance activity, including contributions, loans, receipts. | |
| gned under the penalties of perjury: | (Candidate's signature) Date: 01/22/2024 |

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of 50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and ecords of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions eccived. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule E Liabilities.

**Receipts from a calendar year. Receipts from a contributor of committee must keep detailed accounts and except a contribution of the candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule E Liabilities.

**Receipts from a contributor of committee must keep detailed accounts and except a contribution of the candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule E Liabilities.

| Date Received | Name and Residential Address (alphabetical listing required) | Amount | Occupation & Employer (for contributions of \$200 or more) |
|---------------|--|----------|--|
| 11/01/2023 | George Ford 125 Hickory Lane Weymouth, MA 02190 | \$250.00 | Retired |
| 11/01/2023 | John & Jean Lacey 29 Harvest Lane Weymouth, MA 02190 | \$100.00 | Retired |
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SCHEDULE A: RECEIPTS (continued)

| Date Received | Name and Residential Address (alphabetical listing required) | Amount | Occupation & Employer (for contributions of \$200 or more) |
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| ne 10: Total Receipt | ts over \$50 (or listed above) | \$350.00 | * If you have itemized receipts of \$50 and |
| | s \$50 and under (not listed above) | \$ 25.00 | under, include them in line 10. Line 11 should include only those receipts not |
| ne 12: TOTAL RE | CEIPTS IN THE PERIOD | \$375.00 | itemized shove |

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

| Date Paid | To Whom Paid (alphabetical listing) | Address | Purpose of Expenditure | Amount |
|-----------|-------------------------------------|--|------------------------|----------|
| 11/8/2023 | Jared Valanzola | 112 Webster Street Rockland, MA 02370 | Campaign Work | \$500.00 |
| 11/8/2023 | East Coast Printing | 2 Keith Way; Unit 5 Hingham, MA 02043 | Mailing | \$489.99 |
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SCHEDULE B: EXPENDITURES (continued)

| Date Paid | To Whom Paid (alphabetical listing) | Address | Purpose of Expenditure | Amount |
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| and under, inclu | emized expenditures of \$50 de them in line 13. Line 14 | Line 13: Expenditures over \$50 (c | or listed above) | \$ 989.99 |
| should include | only those expenditures not emized above. | Line 14: Expenditures \$50 and under (not listed above) \$ 0.00 | | |
| Enter on page 1, line 4 → Line 15: TOTAL EXPENDITURES IN THE PERIOD \$ 989.99 | | | | |

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

M.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 lecords of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all receipts. Please

| Date Received | From Whom Received* | Residential Address | Description of Contribution | Value |
|-----------------|---|-------------------------------------|-----------------------------|---------|
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| 50 and under, i | emized in-kind contributions of include them in line 16. Line 17 | Line 16: In-Kind Contributions over | \$50 (or listed above) | \$ 0.00 |
| should includ | le only those expenditures not itemized above. | The 17 To William I am I | | |
| | Enter on page 1, line 6 → | Line 18: TOTAL IN-KIND CONTRI | BUTIONS IN THE PEDIOD | \$ 0.00 |

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and the outstanding balance, as well as those liabilities incurred during this reporting period.

| Date Incurred | To Whom Due | Address | Purpose | Amount |
|---------------|---------------------------|--------------------------|----------------------|--------|
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| | Enter on page 1, line 7 → | Line 19: TOTAL OUTSTANDI | NG LIABILITIES (ALL) | 0.00 |

SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

| Date Paid | Name and Address of Vendor (alphabetical listing required) | Amount | I | Purpose of Expenditure |
|---|--|-------------|----------|--|
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| (or fisted above) | Out-Of-Pocket Expenditures Over \$50 | \$ 0.00 | _ | * If you have out-of-pocket expenses of \$50 |
| Line 21: Total Unitemiz under (not listed above) | ed Out-Of-Pocket Expenditures \$50 and | \$ 12.53 | | and under, include them in line 20. Line 21 should include only those expenditures not itemized above. |
| Line 22: TOTAL OUT-OF | -POCKET EXPENDITURES IN THE PERIOD | \$ 12.53 | ← | |