

Commonwealth  
of Massachusetts

## Time:

City or Town of:

Dighton

Reporting Period:

### Beginning:

01	2024
----	------

(MM/DD/YYYY)

### Ending:

12/31/2024

(MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary

8t

☐ 8th day preceding election☐☐ 30th day following election (town or special)☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]



RECEIVED  
Town Clerk-Dighton, MA

Town Clerk-Dighton, MA

DEC 19 2024

Form CPF M 102-0: Campaign Finance Report  
Municipal Form  
Office of Campaign and Political Finance

## Time:

By:

Please print or type all information, except signatures.

City or Town of:

Reporting Period:

Beginning:

~~03115172023 01-01-24~~

Ending:

~~03/16/2026~~ 03/24

MM/DD/YYYY

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary☐ 8th day preceding election☐ 30th day following election (town or special)

☒ ~~20th~~ day of January (Year-End report)

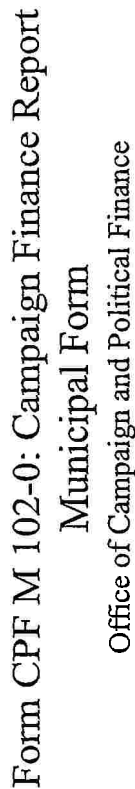
Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.

2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.

3. I certify that I do not have a political committee.

[illegible]

Commonwealth  
of Massachusetts

*Please print or type all information, except signatures.*

City or Town of: Dighton

Reporting Period: Beginning: 01/01/2024 (MM/DD/YYYY)

Ending: 12/31/24  
(MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary☐ 8th day preceding election☐ 30th day following election (town or special)☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

**RECEIVED**  
Town Clerk-Dighton, MA

DEC 10 2024

Time: \_\_\_\_\_

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/24 Ending Date: 12/31/24

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Shara A. Costa  
Candidate Full Name (if applicable)  
Town Clerk's Office  
Office Sought and District  
2431 Winthrop St.  
Residential Address  
E-mail: SCosta@dighton-MA.gov  
Phone #: 774-872-0915

\_\_\_\_\_  
Committee Name  
\_\_\_\_\_  
Name of Committee Treasurer  
\_\_\_\_\_  
Committee Mailing Address  
E-mail: \_\_\_\_\_  
Phone #: \_\_\_\_\_

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report 0  
Line 2: Total receipts this period (page 3, line 12) 0  
Line 3: Subtotal (line 1 plus line 2) 0  
Line 4: Total expenditures this period (page 5, line 15) 0  
Line 5: Ending Balance (line 3 minus line 4) 0  
Line 6: Total in-kind contributions this period (page 6, line 18) 0  
Line 7: Total (all) outstanding liabilities (page 7, line 19) 0  
Line 8: Total out-of-pocket expenses this period (page 8, line 22) 0  
Line 9: Name of bank(s) used: \_\_\_\_\_

### Affidavit of Committee Treasurer:

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 all 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: \_\_\_\_\_ (Treasurer's signature)

Date: \_\_\_\_\_

### 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 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.

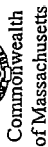
#### Candidate without Committee

☒ 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.

Signed under the penalties of perjury: Shara Costa (Candidate's signature)

Date: 12/10/24





*Please print or type all information, except signatures.*

City or Town of:

Dighton, MA

Reporting Period: \_\_\_\_\_ Beginning: \_\_\_\_\_

### Ending:

(MM/DD/YYYY)

MM/DD/YYYY

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary☐ 8th day preceding election☐ 30th day following election (town or special)

☐ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]

RECEIVED  
Town Clerk-Dighton, MA



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

OCT 21 2024

Time: 12:50 PM  
By: SC

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: August 2024 Ending Date: November 2, 2024

Type of Report: (Check one)

☒ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Edward Freeman Dutra Jr  
Candidate Full Name (if applicable)  
Bristol-Plymouth Regional School Committee  
Office Sought and District  
1865 Buck Plain Rd Dighton MA 02745  
Residential Address  
E-mail: eddhome@comcast.net  
Phone#(optional): 5089893416

Committee Name  
Name of Committee Treasurer  
Committee Mailing Address  
E-mail:  
Phone # (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>N/A</u>

### Affidavit of Committee Treasurer:

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 all 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Edward F Dutra Jr (Treasurer's signature)

Date: 10/21/2024

### 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 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.

Signed under the penalties of perjury: Edward F Dutra Jr (Candidate's signature)

Date: 10/21/2024



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 11/04/24 Ending Date: 11/14/24

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☒ 30 day after election ☐ year-end report ☐ dissolution

Edward F Dutra Jr  
Candidate Full Name (if applicable)

Bristol-Plymouth School Committee  
Office Sought and District

1865 Buck Plain Rd Dighton MA 02715  
Residential Address

E-mail: eddname@comcast.net

Phone#: 508 989 3416

Bristol-Plymouth Regional Technical School District  
Committee Name

Jacqueline Boudreau  
Name of Committee Treasurer

207 Hart Street, Taunton, MA 02780  
Committee Mailing Address

E-mail: jboudreau@bpotech.org

Phone#: 508-823-5151

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report 0

Line 2: Total receipts this period (page 3, line 12) 0

Line 3: Subtotal (line 1 plus line 2) 0

Line 4: Total expenditures this period (page 5, line 15) 0

Line 5: Ending Balance (line 3 minus line 4) 0

Line 6: Total in-kind contributions this period (page 6, line 18) 0

Line 7: Total (all) outstanding liabilities (page 7, line 19) 0

Line 8: Total out-of-pocket expenses this period (page 8, line 22) 0

Line 9: Name of bank(s) used: NONE

### Affidavit of Committee Treasurer:

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 all 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: \_\_\_\_\_ (Treasurer's signature) Date: \_\_\_\_\_

### 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 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.

Signed under the penalties of perjury: Edward F Dutra Jr (Candidate's signature) Date: 11/14/2024



Form CPF M 102-0: Campaign Finance Report  
Municipal Form  
Office of Campaign and Political Finance

Town Clerk-Dighton, MA

DEC 19 2024

Time

By

Please print or type all information, except signatures.

City or Town of:

Reporting Period:	Beginning:	Ending:
	1   24	12 30
	(MM/DD/YYYY)	(MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary
 ☐ 8th day preceding election
 ☐ 30th day following election (town or special)
 ☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED  
Berk-Dighton, MA  
DEC 16 2024

Time: \_\_\_\_\_

By: \_\_\_\_\_

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/24 Ending Date: 12/31/24

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Thomas Ferry  
Candidate Full Name (if applicable)  
Tiree warden, sewer commission  
Office Sought and District  
1070 William St. No. Dighton  
Residential Address  
E-mail: TFerry@Dighton-Ma.Gov  
Phone #: 774-218-5339

\_\_\_\_\_  
Committee Name  
\_\_\_\_\_  
Name of Committee Treasurer  
\_\_\_\_\_  
Committee Mailing Address  
E-mail: \_\_\_\_\_  
Phone #: \_\_\_\_\_

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

\_\_\_\_\_

Line 2: Total receipts this period (page 3, line 12)

\_\_\_\_\_

Line 3: Subtotal (line 1 plus line 2)

\_\_\_\_\_

Line 4: Total expenditures this period (page 5, line 15)

\_\_\_\_\_

Line 5: Ending Balance (line 3 minus line 4)

\_\_\_\_\_

Line 6: Total in-kind contributions this period (page 6, line 18)

\_\_\_\_\_

Line 7: Total (all) outstanding liabilities (page 7, line 19)

\_\_\_\_\_

Line 8: Total out-of-pocket expenses this period (page 8, line 22)

\_\_\_\_\_

Line 9: Name of bank(s) used:

\_\_\_\_\_

### Affidavit of Committee Treasurer:

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 all 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: \_\_\_\_\_ (Treasurer's signature)

Date: \_\_\_\_\_

### 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 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.

Signed under the penalties of perjury: \_\_\_\_\_ (Candidate's signature)

Date: 12/16/24



Town Clerk-Dighton, MA

# Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Please print or type all information, except signatures.

# Eighteen

01/01/24	
----------	--

2/31/24

☐ 8th day preceding preliminary/primary☐ 8th day preceding election☐ 30th day following election (town or special)

☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.



Commonwealth  
of Massachusetts

Form CPF M109:

Statement of Municipal Candidate  
Not Raising or Expending Campaign Funds

Office of Campaign and Political Finance

File with: Local Election Official (City or Town Clerk)

Candidate's Name: NANCY J GOULART  
Office Sought: ASSESSOR  
Residential Address: 631 Gray Terrace  
City/ State/ Zip: North Dighton, MA 02764-0464  
E-Mail Address: ngoulart@comcast.net Phone Number: (508) 823-6179

I hereby certify that I have not opened a campaign bank account for campaign funds because I do not intend to accept contributions or in-kind contributions, make expenditures, **including expenditures of my own funds**, or incur liabilities for any campaign-related purpose, **nor do I currently have any outstanding liabilities for prior campaign-related activity**. I submit the following as my campaign report for all bank reporting periods in this calendar year as provided for in Chapter 55 of the Massachusetts General Laws:

1. Ending balance from previous report	ZERO
2. Total receipts for reporting period	ZERO
3. Subtotal	ZERO
4. Total Expenditures for reporting period	ZERO
5. Ending balance	ZERO

After filing this statement, if I decide to raise, accept, or expend funds, or incur liabilities, for a campaign-related purpose, I will immediately notify my local election official in writing, and will file periodic campaign finance reports according to the statutory filing schedule.

Until such notice is on file with the local election official, I certify that the above Zero report will be in effect for each reporting period, **in the calendar year in which it is filed**, required by Chapter 55 of the Massachusetts General Laws.

This form is valid through December 31 of the year in which it was signed.

SIGNED UNDER THE PENALTIES OF PERJURY:

Nancy J. Goulart  
Candidate's signature:

Date: 11/28/2024



Please print or type all information, except signatures.

Reporting Period: 1/20/2024 (MM/DD/YYYY)

Beginning: \_\_\_\_\_

Ending: 12/31/2024 (MM/DD/YYYY)

☐ 8th day preceding preliminary/primary
 ☐ 8th day preceding election
 ☐ 30th day following election (town or special)
 ☒ 20th day of January (Year-End report)

1. I certify that I am a candidate for or currently hold Municipal Office.

2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.

3. I certify that I do not have a political committee.

[illegible]





Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

1/1/24

Ending Date:

12/31/24

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Aun Elaine Meitzen

Candidate Full Name (if applicable)

Library Trustee

Office Sought and District

3091 Hunters Hill Drive

Residential Address

E-mail: amcitzen@gmail.com

Phone #: 860-944-1092

Dighton Public Library Trustees

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone #:

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 12)

0

Line 3: Subtotal (line 1 plus line 2)

0

Line 4: Total expenditures this period (page 5, line 15)

0

Line 5: Ending Balance (line 3 minus line 4)

0

Line 6: Total in-kind contributions this period (page 6, line 18)

0

Line 7: Total (all) outstanding liabilities (page 7, line 19)

0

Line 8: Total out-of-pocket expenses this period (page 8, line 22)

0

Line 9: Name of bank(s) used:

## Affidavit of Committee Treasurer:

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 all 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Treasurer's signature)

Date:

## 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 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.

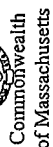
### Candidate without Committee

☐ 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.

Signed under the penalties of perjury:

(Candidate's signature)

Date:



Form CPF M 102-0: Campaign Finance Report  
Municipal Form  
Office of Campaign and Political Finance

Please print or type all information, except signatures.

City or Town of: Dighton

Reporting Period: 01-01-24 (MM/DD/YYYY)  
Ending: 12-31-24 (MM/DD/YYYY)

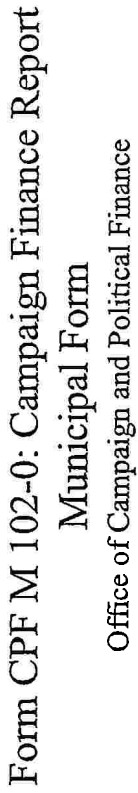
Type of Report: (Check One)

☐ 8th day preceding preliminary/primary
 ☐ 8th day preceding election
 ☐ 30th day following election (town or special)
 ☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]

Commonwealth  
of Massachusetts

*Please print or type all information, except signatures.*

City or Town of: Dighton

Reporting Period: \_\_\_\_\_

Ending:

12/31/2024 (MM/DD/YYYY)

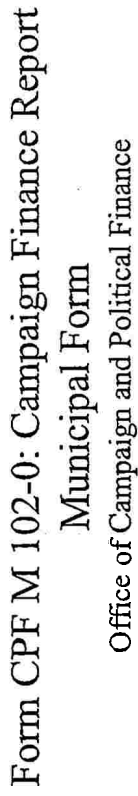
Type of Report: (Check One)

☐ 8th day preceding preliminary/primary☐ 8th day preceding election☐ 30th day following election (town or special)☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]

Commonwealth  
of Massachusetts

City or Town of: Dighton

Reporting Period: \_\_\_\_\_ Beginning: \_\_\_\_\_ Ending: \_\_\_\_\_  
(MM/DD/YYYY) (MM/DD/YYYY) (MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary
 ☐ 8th day preceding election
 ☐ 30th day following election (town or special)
 ☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Candidate Full Name (if applicable)	Committee Name
Office Sought and District	Name of Committee Treasurer
Residential Address	Committee Mailing Address
E-mail: _____	E-mail: _____
Phone #: _____	Phone #: _____

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 12)	0
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, line 15)	0
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6, line 18)	0
Line 7: Total (all) outstanding liabilities (page 7, line 19)	0
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	
Line 9: Name of bank(s) used:	

### Affidavit of Committee Treasurer:

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 all 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Edward J. Diney (Treasurer's signature)

Date: \_\_\_\_\_

### FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

#### Candidate with Committee

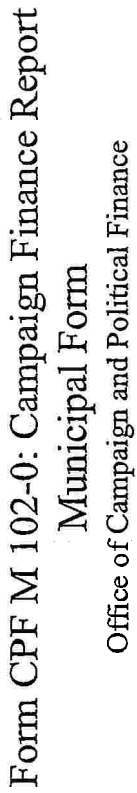
☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of 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.

Signed under the penalties of perjury: Edward J. Diney (Candidate's signature)

Date: 12-27-2021

Commonwealth  
of Massachusetts

*Please print or type all information, except signatures.*

City or Town of:

Reporting Period:	Beginning:	1/1/24	(MM/DD/YYYY)
	Ending:	12/31/24	(MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary
 ☐ 8th day preceding election
 ☐ 30th day following election (town or special)
 ☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]



Town Clerk-Digital

DEC 12 2024

Time:

By: \_\_\_\_\_

Please print or type all information, except signatures.

City or Town of: Dighton

Reporting Period:	Beginning:

Ending: 123120

(MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary☐ 8th day preceding election☐ 30th day following election (town or special)☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]



Commonwealth  
of Massachusetts

File with: Local Election Official (City or Town Clerk)

Form CPF M109:

Statement of Municipal Candidate  
Not Raising or Expending Campaign Funds

Office of Campaign and Political Finance

RECEIVED  
Town Clerk-Dighton, MA

DEC 09 2024

Time: \_\_\_\_\_

By: \_\_\_\_\_

Candidate's Name:	Paul E. Reynolds III		
Office Sought:	Treasurer / Collector		
Residential Address:	725 Main St.		
City / State / Zip:	Dighton MA 02715		
E-Mail Address:	PREYNOLDS1@GMAIL.COM	Phone Number:	774 454 1247

I hereby certify that I have not opened a campaign bank account for campaign funds because I do not intend to accept contributions or in-kind contributions, make expenditures, **including expenditures of my own funds**, or incur liabilities for any campaign-related purpose, **nor do I currently have any outstanding liabilities for prior campaign-related activity**. I submit the following as my campaign report for all bank reporting periods in this calendar year as provided for in Chapter 55 of the Massachusetts General Laws:

1. Ending balance from previous report	ZERO
2. Total receipts for reporting period	ZERO
3. Subtotal	ZERO
4. Total Expenditures for reporting period	ZERO
5. Ending balance	ZERO

After filing this statement, if I decide to raise, accept, or expend funds, or incur liabilities, for a campaign-related purpose, I will immediately notify my local election official in writing, and will file periodic campaign finance reports according to the statutory filing schedule.

Until such notice is on file with the local election official, I certify that the above Zero report will be in effect for each reporting period, in the calendar year in which it is filed, required by Chapter 55 of the Massachusetts General Laws.

This form is valid through December 31 of the year in which it was signed.

SIGNED UNDER THE PENALTIES OF PERJURY:

Candidate's signature:  Date: 12/9/24



RECEIVED  
Clark-Dighton, MA

**Town Clerk-Dignity**

**Form CPF M 102-0: Campaign Finance Report**  
**Municipal Form**  
**Office of Campaign and Political Finance**

Commonwealth  
of Massachusetts

By:

City or Town of:

Digital

Reporting Period:

**Beginning:**

01/01/2024

**Ending:**

1507/2025

MM/DD/YYYY

Type of Report: (Check One)

☐ 8th day preceding

liminary/primary

☐ 8th

ceding election

☐ 30th day follow-up

election (town or special)

☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]



RECEIVED

Town Clerk-Dighton, MA

DEC 09 2024

Form CPF M 102: Campaign Finance Report  
Municipal Form

Office of Campaign and Political Finance

Commonwealth  
of Massachusetts

Time: \_\_\_\_\_

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: \_\_\_\_\_ Beginning Date: 1/1/2024 Ending Date: 12/31/2024

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Kevin Smith Jr  
Candidate Full Name (if applicable)  
Town Moderator & Parks and Recreation  
Office Sought and District  
1147 Center St Dighton, MA 02715  
Residential Address  
E-mail: \_\_\_\_\_  
Phone #: \_\_\_\_\_

\_\_\_\_\_  
Committee Name  
\_\_\_\_\_  
Name of Committee Treasurer  
\_\_\_\_\_  
Committee Mailing Address  
E-mail: \_\_\_\_\_  
Phone #: \_\_\_\_\_

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report 0  
Line 2: Total receipts this period (page 3, line 12) 0  
Line 3: Subtotal (line 1 plus line 2) 0  
Line 4: Total expenditures this period (page 5, line 15) 0  
Line 5: Ending Balance (line 3 minus line 4) 0  
Line 6: Total in-kind contributions this period (page 6, line 18) 0  
Line 7: Total (all) outstanding liabilities (page 7, line 19) 0  
Line 8: Total out-of-pocket expenses this period (page 8, line 22) 0  
Line 9: Name of bank(s) used: \_\_\_\_\_

Affidavit of Committee Treasurer:

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 all 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: \_\_\_\_\_ (Treasurer's signature) Date: \_\_\_\_\_

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

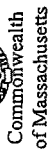
Candidate with Committee

☐ I certify that I have examined this report including attached schedules and it is, to the 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.

Signed under the penalties of perjury: \_\_\_\_\_ (Candidate's signature) Date: 12/10/2024



DEC 09 2024

Form CPF M 102-0: Campaign Finance Report  
Municipal Form  
Office of Campaign and Political Finance

Time: \_\_\_\_\_

By: \_\_\_\_\_

Please print or type all information, except signatures.

City or Town of: Dighton

Reporting Period: 01/01/2024 Beginning: 01/01/2024 Ending: 12/31/2024

(MM/DD/YYYY) (MM/DD/YYYY) (MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary

☐ 8th day preceding election

☐ 30th day following election (town or special)

☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]