

RECEIVED

Town Clerk-Dighton, MA

DEC 16 2024

Office of Campaign and Political Finance
Newspaper - City

Form CPF M 102-0: Campaign Finance Report

Municipal Form

Commonwealth
of Massachusetts



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



Commonwealth
of Massachusetts

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

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

243) Winthrop St.

Residential Address

E-mail: SCOSTA@dighton-MA.BOV

Phone #: 774-872-0916

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



Commonwealth
of Massachusetts

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



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED
Town Clerk-Dighton, MA
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 02740

Residential Address

E-mail: edt1home@comcast.net

Phone#(optional): 508 989 3416

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

0

Line 4: Total expenditures this period (page 5, line 14)

0

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

0

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:

N/A

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: eddhome@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@bptech.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



Commonwealth
of Massachusetts

RECEIVED
Form CPF M 102: Campaign Finance Report Clerk-Dighton, MA
Municipal Form

Office of Campaign and Political Finance

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 on miss, citizen

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:

Thomas Ferry

(Candidate's signature)

Date: 12/16/24

RECEIVED



Commonwealth
of Massachusetts

Town Clerk-Digilene, 111

DEC 16 2024

time.

D_{TT}

Form CPF M 102-0: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

Please print or type all information except signatures

1. *What is the relationship between the two types of energy?*

Reporting Period: Beginning: 01/01/24 Ending: 12/31/24

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.



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

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



Commonwealth
of Massachusetts

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



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

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

<u>Ann Elaine Meitzen</u>	
Candidate Full Name (if applicable)	
<u>Library Trustee</u>	
Office Sought and District	
<u>3091 Hunters Hill Drive</u>	
Residential Address	
E-mail: <u>ameitzen@gmail.com</u>	
Phone#: <u>860-944-1092</u>	

<u>Dighton Public Library Trustees</u>	
Committee Name	
<u>o</u>	
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: Ann Elaine Meitzen

(Candidate's signature)

Date: 12/14/24



Commonwealth
of Massachusetts

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

Municipal Form Office of Campaign and Political Finance

Digitized by N

City or Town of:

Please print or type all information, except signatures.

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

Type of Report: (Check One)	<input type="checkbox"/> 8th day preceding preliminary/primary	<input type="checkbox"/> 8th day preceding election	<input type="checkbox"/> 30th day following election (town or special)
	<input checked="" type="checkbox"/> 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 M 102-0: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

Please print or type all information, except signatures.

Richards

City or Town of:

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

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



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)

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.

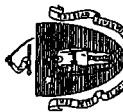
Candidate without Committee

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: 12-27-2021



Commonwealth
of Massachusetts

Form CPF M 102-0: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

Please print or type all information, except signatures.



Commonwealth
of Massachusetts

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

RECEIVED
Town Clerk-Dighton, MA
DEC 09 2024
Time: _____
By: _____

Form CPF M109:
Statement of Municipal Candidate
Not Raising or Expenditure Campaign Funds
Office of Campaign and Political Finance

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:	<u>PREYNOLDS1@GMAIL.COM</u>	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: 12/09/24



RECEIVED

FormCPF M 102: Campaign Finance Report
Town Clerk-Dighton, MA

DEC 09 2024

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: 11/1/2024 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

<p><u>Kevin Smith Jr</u> Candidate Full Name (if applicable)</p> <p><u>Town Moderator & Park and Recreation</u> Office Sought and District</p> <p><u>1147 Center St Dighton, MA 02715</u> Residential Address</p> <p>E-mail: _____</p> <p>Phone #: _____</p>	<p>Committee Name _____</p> <p>Name of Committee Treasurer _____</p> <p>Committee Mailing Address _____</p> <p>E-mail: _____</p> <p>Phone #: _____</p>
--	--

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: MR

(Candidate's signature)

Date: 12/10/2024

