

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report Municipal Form SUMERVILLE, MA

File with: City or Town Clerk of Blection Commission Ending Date: Fill in Reporting Period dates: Beginning Date: Type of Report: (Check one) year-end report dissolution 30 day after election 8th day preceding preliminary 8th day preceding election COMMITTEE TO ELECT PAUL BILLIAMS PAUL BOCKELMAN
Candidate Full Name (if applicable) CATHEMINE W. BANGER School Committee - WARD SUR Name of Committee Treasurer ey White STUCO, Sanchuico, M 64 WALLICE STROOT; Somering MA
Residential Address Telephone Number (optional): Telephone Number (optional): SUMMARY BALANCE INFORMATION: 2,105.81 Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) 2,105.81 Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) 2.105.81 Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 6) 0.00 Line 7: Total (all) outstanding liabilities (page 7) 0.00 WINTER HER BANK Line 8: 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: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) 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 an habit of the contraction. 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. 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 ombehalf of this committee in accordance with the requirements of M.G.L. c. 55. (Candidate's signature)

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.)

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Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← ☐ Enter on page 1, line 2
			ald include only those receipts not itemized shove

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.