

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

assachusetts			onice of campaign and rouncal rinance	The state of the s
or Town of:	Chilmark			Please print or type all information, except signatures.
orting Period:	Beginning:	04/26/2023	Ending:	05/26/2013
		(MM/DD/YYYY)		(MM/DD/YYYY)

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the many of the ma	65/26/2:23 (MM/DD/YYYY)		20th day of January (Year-End report)	uant 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.	S OFFICE SOUGHT	IMITEL OF CHIMACE LIBERTY		
	Ending:		4 30th day following election (town or special)	gations during this reporting period,	RESIDENTIAL ADDRESS (Street and Number)			
	04/26/2023 (MM/DD/YYYYY)		Sth day preceding election	ınicipal Office. ide any expenditures, or incurred any oblig	SIGNATURE Signed under the penalties of perjury			
Chilmark	Beginning:	eck One)	8th day preceding preliminary/primary 2th day p	uant 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 expend 3. I certify that I do not have a political committee.	PRINT NAME	NAME A PERSON		
City or Town of:	Reporting Period:	Type of Report: (Check One)	8th day precedin	Pursuant to M.G.L. Chapter 55: 1. I certify that I am a cand 2. I certify that I have not r 3. I certify that I do not hav	DATE			



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

Office of Campaign and Political Finance

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	2 5 2023	ll informatio
	MAY	rint or type a
port		Please p

City or Town of:	V	C#11mark		Please print or type all information, except sig
Reporting Period:	Beginning:	4 ( 3 ( 2 3 )	Ending:	5/16/23 (MMIDD/YYYY)
Type of Report: (Check One)	(One)	8th day preceding election	As0th day following election (fown or special)	20th day of Jamany (Vear Find renort

Je en reperi (circum circ)			
] 8th day preceding preliminary/primary	With day preceding election	(town or special)	20th day of January (Year-End report)
ursuant to M.G.L. Chapter 55:			
1. I certify that I am a candidate for or currently hold Municipal Office.	urrently hold Municipal Office.		
2. I certify that I have not received any cont	ontributions, made any expenditures	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	od, and do not have a campaign fund in existenc

ن

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

OFFICE SOUGHT	Planning Board						
RESIDENTIAL ADDRESS (Street and Number)	481 North-Road						
Signed under the penalties of perjury	J. ALMSen-	2					
PRINT NAME	Janet L Weidrer						
DATE	5/25/23						



### Form CPF M 102: Campaign Finance Report

**Municipal Form** 

Office of Campaign and Political Finance

MAY 2 5 2023

ile with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Apri	19,2023 Ending Date: ( May 16, 2023									
Type of Report: (Check one)										
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution									
Janet Weidner Candidate Full Name (if applicable)	Committee Name									
Hanning Board Menber  H81 North Rd; Ch. Imark	Name of Committee Treasurer									
E-mail: Residential Address  Weidher C m. tre.org	Committee Mailing Address  E-mail:									
Phone # (optional):	Phone # (optional):									
SUMMARY BALANCE	INFORMATION:									
Line 1: Ending Balance from previous report										
Line 2: Total receipts this period (page 3, line 11)										
Line 3: Subtotal (line 1 plus line 2)										
Line 4: Total expenditures this period (page 5, line 14)										
Line 5: Ending Balance (line 3 minus line 4)										
Line 6: Total in-kind contributions this period (page	e 6)									
Line 7: Total (all) outstanding liabilities (page 7)										
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 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 acc Signed under the penalties of perjury:	ntributions and liabilities for this reporting period and represents the campaign									
FOR CANDIDATE FILINGS ONLY: Affidavit 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 incurred any liabilities nor made any expenditures on my behalf during this reporting persons.	rdance with the requirements of M.G.L. c. 55. I have not received any contributions,									
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the be finance activity, including contributions, loans, receipts, expenditures, disbursements, ir campaign finance activity of all persons acting under the authority or on behalf of this c	n-kind contributions and liabilities for this reporting period and represents the									
Signed under the penalties of perjury:	(Candidate's signature)  Date: 25 May 2023									



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



Office of Campaign and Political Finance

Please print or type all information, except signatures.	(MM/DD/YYYY)		20th day of January (Year-End report)	nant 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.	OFFICE SOUGHT	Finance Committee						
Plea	Ending: 5/16/2023			gations during this reporting period, and	RESIDENTIAL ADDRESS (Street and Number)	18 Crick Hill Road						
	(MM/DD/YYYY)		☐ 8th day preceding election	nicipal Office. de any expenditures, or incurred any obli	Signed under the penalties of perjury	Jahnah Magalou						
Chilmark	Beginning: 04/09/2023		[ ] 8th day preceding preliminary/primary [ ] 8th day pr	uant 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 expend  3. I certify that I do not have a political committee.	PRINT NAME	Deborah Hancock						
City or Town of:	Reporting Period:	Type of Report: (Check One)	Sth day preceding	Pursuant to M.G.L. Chapter 55: 1. I certify that I am a cand 2. I certify that I have not ro 3. I certify that I do not have	DATE	5/15/2023 De						



# Form CPF M 102-v. Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Paracelation of	P. C. Street Street, and a second	
		natures.
	2023	on, except signatures
13	12	127
REAL PROPERTY.	N N	inform
(E)	The second support	type all
Section and an experience of the section of the sec	The second secon	ase print or type all informa
		ise i

Please print or type all information, except signat	(MM/DD/YYYY)		20th day of January (Year-End report)	not have a campaign fund in existenc	OFFICE SOLIGHT	BOARD OF ASSESSORS	
Please ,	Ending: 65/16/2033		(1) 30th day following election (town or special)	gations during this reporting period, and do	RESIDENTIAL ADDRESS (Street and Number)	14 LADY SUPPERLANE	
	)3 (MM/DD/YYYY)		☐ 8th day preceding election ☑ 30th day follow	micipal Office. de any expenditures, or incurred any oblig	Signed under the penalties of periury	Graph B. Olum	
CHILMARK	d: Beginning: 04/09/2023	Check One)	8th day preceding preliminary/primary 🔃 8th day pr	uant 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 existenc 3. I certify that I do not have a political committee.	PRINT NAME	FLIZABETH BOLIVER	
ity or Town of:	eporting Period:	ype of Report: (Check One)	] 8th day preced	ursuant to M.G.L. Chapter 55: 1. I certify that I am a cand 2. I certify that I have not r 3. I certify that I do not hav	DATE	5/10/23	



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

Office of Campaign and Political Finance

Please print or type all information, except signatures.	5/16/23 (MM/DD/YYYY)	1) Ofth day of Lamana (V)	uant 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.	OFFICE SOUGHT	Cemercay Commission	
F	Ending:	30th day following election (town or enecial)	gations during this reporting period, a	RESIDENTIAL ADDRESS (Street and Number)	4 TUCKER TRAIL	
	g/Rrz)		xipal Office. any expenditures, or incurred any oblig	Signed under the penalties of perjury	order G. Frades	
CHILMAR K	Beginning:	ype of Report: (Check One)  Sth day preceding preliminary/brimary  Rth day preceding plection	uant 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 expend 3. I certify that I do not have a political committee.		Sudim V. Franderes	
City or Town of:	Reporting Period:	Type of Report: (Check One)	Pursuant to M.G.L. Chapter 55:  1. I certify that I am a cand:  2. I certify that I have not re  3. I certify that I do not hav	DATE	5/11/2023	



### Form CPF M 102: Campaign Finance Report

**Municipal Form** 

Office of Campaign and Political Finance

MAY - 5 2023

				File with: City or Town Cic	rk or Election Commission
Fill in Re	eporting Period dates: Beginning Date:		Ending I	Date:	the land general general parties and the second
Type of I	Report: (Check one)				
8th day	y preceding preliminary 8th day preceding election	30 day	after election	year-end report	dissolution
	Marie K Larsen				
Ch	Candidate Full Name (if applicable)  Umark Reet Board			Committee Name	
	Office Sought and District		Na	me of Committee Treasurer	
E-mail:	narie, chimartelectboard@smail	E-mail:		ommittee Mailing Address	
Phone # (opti	ional):	Phone # (o	ptional):		
	SUMMARY BALAN	CE INFO	RMATION:		
	Line 1: Ending Balance from previous report		185	55.69	
Ţ.	Line 2: Total receipts this period (page 3, line 1)	1)	<	5	
	Line 3: Subtotal (line 1 plus line 2)		1822	5.69	
	Line 4: Total expenditures this period (page 5, li	ne 14)		0	
	Line 5: Ending Balance (line 3 minus line 4)		1823	5,69	
	Line 6: Total in-kind contributions this period (p	page 6)		2	
	Line 7: Total (all) outstanding liabilities (page 7				
	Line 8: Name of bank(s) used:				
I certify that I activity, inclu-	Committee Treasurer: I have examined this report including attached schedules and it is, to the bedding all contributions, loans, receipts, expenditures, disbursements, in-king ty of all persons acting under the authority or on behalf of this committee i	d contributions a	and liabilities for this	s reporting period and represe	all campaign finance
Signed under	r the penalties of perjury:		(Treasurer's	s signature) Date:	
FOR CAN	NDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 b	oox only)			
I certify to activity,	ate with Committee that I have examined this report including attached schedules and it is, to to of all persons acting under the authority or on behalf of this committee in a any liabilities nor made any expenditures on my behalf during this reportir	accordance with	the requirements of	FM.G.L. c. 55. I have not rece	nt of all campaign finance eived any contributions,
I certify t	ate without Committee that I have examined this report including attached schedules and it is, to the activity, including contributions, loans, receipts, expenditures, disbursement in finance activity of all persons acting under the authority or on behalf of the	its, in-kind contr	ibutions and liabiliti	ies for this reporting period are requirements of M.G.L. c. 55	nd represents the
Signed under	r the penalties of perjury:		(Candidate)	's signature) Date:	3/3/21

### **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 port 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)
- III ALUUATUU	(ban-arran worned redamen)	T. IIII OUT	(101 COMMINGUIS OF \$200 OF MOTE)
		<u> </u>	
	<u> </u>		[
ne 9: Total Receip	ts over \$50 (or listed above)		
ne 10: Total Receir	ots \$50 and under* (not listed above)		
ne 11: TOTAL RI	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<sup>\*</sup> 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)
Line 9: Total Recei	pts over \$50 (or listed above)		
ine 10: Total Rece	ipts \$50 and under* (not listed above)		
Line 11: TOTAL R	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<sup>\*</sup> 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 port all expenditures. Please include your committee name and a page number on each page.)

port 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	
Date I alu	(alphabetical listing)	Addiess	Turpose of Expenditure	Amount	
				r -	
	Line 12: Total Expenditures over \$50 (or listed above)				
)	Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD					

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4

### SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Faiu	(aiphabetical fisting)	Address	1 urpose of Expenditure	Amount
n l				
i				
	<u></u>			
	Line 12: Expenditures over \$50 (or listed above)			
)		Line 13: Expenditures \$50 and a	under* (not listed above)	
	Enter on page 1, line 4 →	nter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD		

<sup>\*</sup> 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
15		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 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				

<sup>\*</sup> 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.

Pate Incurred	To Whom Due	Address	Purpose	Amount
	unic control c			
		I 10 MOTH OFFICE	NDING LIABILITIES (ALL)	