

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

7573777 (1287 C.P.) 9617 (127 P.C.) (1

Fill in Reporting Period dates: Beginning Date: 3	29 aa Ending Date: 5 9 22
Type of Report: (Check one)  ☐ 8th day preceding preliminary  ☐ 8th day preceding election	30 day after election year-end report dissolution
Timothy Ladd Fagerson  Candidate Full Name (if applicable)	Markway Satural Committee
	Committee Name
School Committee  Office Sought and District	Name of Committee Treasurer
120 Winthrop Street, Medway, MA 020523	Twine of Committee Treatment
Residential Address	Committee Mailing Address
E-mail: Tim@sos-pt.com OR twfagerson@hotmail.com	E-mail:
Phone # (optional):	Phone # (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 11)	#100.00
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, lin	e 14) \$ 297.50
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period (pa	age 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: Chorles	River Bonk, Medway, MA
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	ox only)
activity, of all persons acting under the authority or on behalf of this committee in activity, of all persons acting under the authority or on behalf of this committee in activity, of all persons acting under the authority or on behalf of this committee in activity, of all persons acting under the authority or on behalf of this committee in activity, of all persons acting under the authority or on behalf of this committee in activity, of all persons acting under the authority or on behalf of this committee in activity, of all persons acting under the authority or on behalf of this committee in activity.	e best of my knowledge and belief, a true and complete statement of all campaign finance coordance with the requirements of M.G.L. c. 55. I have not received any contributions, g 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 finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	s, in-kind contributions and liabilities for this reporting period and represents the is candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the panelties of periury	(Candidate's signature) Date: 05/7/22

### 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.)

port all receipts. P	lease include your committee name and a pa	ge number on eac	en page.)
Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4-12-22	Jeffrey Choney 49 Pine St. A 02481 Wellesley MA 02481	\$100.00	
and the state of t			
Line 9: Total Rec	eipts over \$50 (or listed above)	\$100.00	
Line 10: Total Re	ceipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD	\$100.00	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)	
  -  -				
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		J L JOHN DE LA CONTROL DE LA C		
Line 9: Total Rece	eipts over \$50 (or listed above)			
	eipts \$50 and under* (not listed above)	- Augustinos - Aug		
	RECEIPTS IN THE PERIOD	Landa esta esta esta esta esta esta esta est		
		o O. Lino 10 show	☐ Enter on page 1, line 2  Ild include only those receipts not itemized above.	

<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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
1-11-22	AD Print	96 Main St. Medway MA 02053	signs	\$297.50
Marie		Line 12: Total Expenditures	over \$50 (or listed above)	
		Line 13: Total Expenditures \$50 and under* (not listed above)		
	Enter on nage 1 line A	Line 14: TOTAL EXPEND	ITURES IN THE PERIOD	\$ 297.50

<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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Jate 1 atu				
5				
			OCO ( - History de la la covera)	
			ver \$50 (or listed above)	
			50 and under* (not listed above)	
	Enter on page 1, line 4	→ Line 14: TOTAL EXP	ENDITURES IN THE PERIOD  ine 13 should include only those expend	

<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 Page 5 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
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			ALLOCATION P. C.	****
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				anname to the second se
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		Control of the Contro		
		Line 15. In Vind Contributions	over \$50 (or listed above)	
		Line 15: In-Kind Contributions		
		Line 16: In-Kind Contributions		
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.

Date Incurred	To Whom Due	Address	Purpose	Amount
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