



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

Daniel DeRoss

Candidate Full Name (if applicable)

Sewer Commissioner

Office Sought and District

31 Colby St. Rockland, MA 02370

Residential Address

E-mail: duduross.everizon.net

Phone # (optional): 781 878 7434

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

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

249.69

Line 3: Subtotal (line 1 plus line 2)

249.69

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

249.69

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

0

Line 6: Total in-kind contributions this period (page 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 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: 7/27/21

TOWN CLERK, ROCKLAND
APR 29 2021 AM 11:14

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/31/21	Corning Silk Screen Print Inc 17 Bishop Lane Rockland MA	249.69	
Line 9: Total Receipts over \$50 (or listed above)			← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		249.69	

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

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure (include CPF ID# if a contribution to another committee)	Amount
3/31/21	Corning Silk Screen Print WAB	17 Bishop Lane Rockland		249.69
			Line 12: Expenditures over \$50 (or listed above)	
			Line 13: Expenditures \$50 and under* (not listed above)	
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	249.69

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



17 Bishop Lane, Rockland, Mass. 02370
781.870.6525 • Fax 781.871.5500

Invoice

DATE	INVOICE #
3/31/2021	25089

BILL TO
Dan Duross

SHIP TO

P.O. NUMBER	TERMS	REP	VIA	F O.B.	PROJECT
			3/31/2021		

QUANTITY	ITEM CODE	DESCRIPTION	PRICE EACH	AMOUNT
25	COROPLAST	18" x 24" Blue on White with Stakes - Dan Duross Sewer Commissioner Sales Tax	9.40 6.25%	235.00 14.69
<i>Handwritten:</i> 25 x 24" Blue on White with Stakes - Dan Duross Sewer Commissioner <i>Handwritten:</i> 25 x 24" Blue on White with Stakes - Dan Duross Sewer Commissioner <i>Handwritten:</i> Paid in full <i>Handwritten:</i> gtl				
Total				\$249.69