TOWN CLERK, ROCKLAND
APR 1'22 PM 12:45
Form CPF M 102: Campaign Finance Report **Municipal Form**

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commis
Fill in Reporting Period dates: Beginning Date: 3/1/2	
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution
LORI CHILDS Candidate Full Name (if applicable)	LORI CHILDS FOR SELECTMAN'S BOARD Committee Name
SELECTMAN	VICTORIA T DEIBEL
Office Sought and District	Name of Committee Treasurer
234 NORTH AVE	678 HINGHAM ST
Residential Address	Committee Mailing Address
E-mail: LORICHILDS@VERIZON.NET	E-mail: DEIBELV@GMAIL.COM
Phone # (optional):	Phone # (optional):
	I - L
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	O
Line 2: Total receipts this period (page 3, line 11)	880
Line 3: Subtotal (line 1 plus line 2)	880
Line 4: Total expenditures this period (page 5, line	ne 14) 1338.95
Line 5: Ending Balance (line 3 minus line 4)	-458.95
Line 6: Total in-kind contributions this period (page	age 6) 29.20
Line 7: Total (all) outstanding liabilities (page 7)	1309.75
Line 8: Name of bank(s) used: MOUNTAIN ONE	JE .
Signed under the penalties of perjury.	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. [Treasurer's signature] [Treasurer's signature] [Treasurer's signature]
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the lactivity, of all persons acting under the authority or on behalf of this committee in accommittee in accommittee and liabilities nor made any expenditures on my behalf during this reporting process.	best of my knowledge and belief, a true and complete statement of all campaign finan cordance 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 beginning finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this	in-kind contributions and liabilities for this reporting period and represents the

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)
3/1/2022	SANDRA LAKEN 4900 BUTLER ROAD GLYNDON, MD 21071	200	RETIRED
3/28/2022	ED LEDIN 4 ELIZABETH ST ROCKLAND, MA	60	RETIRED
3/19/2022	KATINA MANNING 178 GEORGE ST DUXBURY, MA 02322	100	CHIROPRACTOR
3/19/2022	CHRISTINE NORTH 124 BRIGANTINE CIRCLE NORWELL, MA	100	ATTORNEY
Line 9: Total Receipts over \$50 (or listed above) 460			
Line 10: Total Receipts \$50 and under* (not listed above) 420			
Line 11: TOTAL RECEIPTS IN THE PERIOD 880			← Enter on page 1, line 2

^{*} 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)
ine 9: Total Receip	ots over \$50 (or listed above)		
ine 10: Total Recei	pts \$50 and under* (not listed above)		
ine 11: TOTAL R	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2

^{*} 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 report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Paid				Amount
3/6/2022	BJS	901 TECHNOLOGY CENTER DR STOUGHTON. MA	FOOD AND PAPER SUPPLIES FOR FUNDRAISER	297.30
3/3/2022	SIGNS ON THE CHEAP	11525 A STONEHOLLOW DR SUITE 100 AUSTIN, TX 78758	100 LAWN SIGNS AND STANDS	706.13
3/2/2022	VISTA PRINT	275 WYMAN ST WALTHAM, MA 02451	5000 POST CARDS	306.36
	1	Line 12: Total Expenditures ov	ver \$50 (or listed above)	1309.75
Line 13: Total Expenditures \$50 and under* (not listed above)			29.20	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	1338.95

^{*} 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)

	To Whom Paid	OLE B. EXIENDITURES (C			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
				[
			f		
	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				
		er, include them in line 12. Line 13 sh		<u></u>	

^{*} 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
Date Received	From whom Received.	Residential Address	Description of Contribution	value
				,
		Line 15: In-Kind Contributions	over \$50 (or listed above)	0
		Line 16: In-Kind Contributions \$50 & under (not listed above)		29.20
	Enton on maga 1 line (-)	Line 17. TOTAL IN KIND CO	ONTRIRITIONS	29.20
	Enter on page 1, line 6 -> Line 17: TOTAL IN-KIND CONTRIBUTIONS			

^{*} 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.

Page 6

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
3-1 TO 4-1	LORI CHILDS	234 NORTH AVE`	SUPPLIES SIGNS POST CARDS	1309.75
	-			
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)			1309.75	