

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 Commission
Fill in Reporting Period dates: Beginning Date: 4-20	
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
5	
SHERRI A UALLIE Candidate Full Name (if applicable)	COMMITTEE TO ELECT SHERR, VALLE
BUARD of SEWER COMMISSIONER	TOMN UALLIEE
Office Sought and District	Name of Committee Treasurer
411 PONDST ROCKLAND	411 POND ST ROCKLAND
Residential Address E-mail: 5K8AGN & UA1100. CA11	Committee Mailing Address
	mail: DONE
Phone # (optional):	one # (optional):
CALIFIE TO THE TAX OF AN	
SUMMARY BALANCE II	NFORMATION:
Line 1: Ending Balance from previous report	320.00
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	320.00
Line 4: Total expenditures this period (page 5, line 14)	320.00
Line 5: Ending Balance (line 3 minus line 4)	-0-
Line 6: Total in-kind contributions this period (page 6)	286.00
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: ROCKLAND FED	ERAL CREDIT CLUION
Affidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best of my activity, including all contributions, loans, receipts, expenditures, distursements, in kind contributions activity of all persons acting under the authority or on behalf of this computer in according to the penalties of perjury:	itions and liabilities for this reporting period and represents the campaign
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the best of activity, of all persons acting under the authority or on behalf of this committee in accordance incurred any liabilities nor made any expenditures on my behalf during this reporting period.	my knowledge and belief, a true and complete statement of all campaign finance with the requirements of M.G.L. c. 55. I have not received any contributions
	my knowledge and belief a true and complete statement of all campaign

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.

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.)

Name and Residential Address Date Received (alphabetical listing required) Amo			Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
1			
1			
		1 11	
e 9: Total Receip	ts over \$50 (or listed above)		
e 10: Total Receip	ots \$50 and under* (not listed above)		
e 11. TOTAL DI	ECEIPTS IN THE PERIOD	0	-
		←	Enter on page 1, line 2

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 Faid	SHEARI VALLIE		
6-18-22	CANDDATE	ROCKIAND LOAN REPAYMENT	320.00
			1
			11
		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	320.00

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

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
5-18-22	SHERRI VALLIE CANDIDATE	411 POND ST ROCKLAND	TOREGIVENESS OF CANNIDATE LOAN	286.80
		Line 15: In-Kind Contribution	s 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 C	ONTRIBUTIONS	286.00

^{*} 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

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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