

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

Office of Campaign and Political Finance

TOWN CLERK'S OFFICE

| Fill in Re   | eporting Period dates: Beginning Date: 1/1/20  | 22 Ending Date: 12/31/2022   |  |  |  |
|--|--|--|--|--|--|
|  | Report: (Check one)  y preceding preliminary   8th day preceding election  | ☐ 30 day after election ☐ year-end report ☐ dissolution  |  |  |  |
| Jane Pierce Morgan  Candidate Full Name (if applicable)                |  | Committee to Elect Jane Morgan  Committee Name   |  |  |  |
| School Committee  Office Sought and District                           |  | Kevin Zawilski  Name of Committee Treasurer  |  |  |  |
| 172 Brattle Street  Residential Address                                |  | 172 Brattle Street  Committee Mailing Address  |  |  |  |
| E-mail:  | janepmorgan@gmail.com  | E-mail: zawilşki@gmail.com   |  |  |  |
| Phone # (opti  | ional):  | Phone # (optional):  |  |  |  |
|  | SUMMARY BALANC   | E INFORMATION:   |  |  |  |
| X.   | Line 1: Ending Balance from previous report  | 386.43   |  |  |  |
|  | Line 2: Total receipts this period (page 3, line 11)   | 1  |  |  |  |
|  | Line 3: Subtotal (line 1 plus line 2)  | 387.43   |  |  |  |
|  | Line 4: Total expenditures this period (page 5, lin  | e 14) 13   |  |  |  |
|  | Line 5: Ending Balance (line 3 minus line 4)   | 374.43   |  |  |  |
|  | Line 6: Total in-kind contributions this period (pa  | ge 6) 0  |  |  |  |
|  | Line 7: Total (all) outstanding liabilities (page 7)   | 0  |  |  |  |
|  | Line 8: Name of bank(s) used: Citizen 's Bank  |  |  |  |  |
| I certify that I<br>activity, inclu<br>finance activit<br>Signed under |  | (Treasurer's signature) Date: 1/3/2023   |  |  |  |
| Candida  I certify to activity,  | ate with Committee that I have examined this report including attached schedules and it is, to the   | be best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions,   |  |  |  |
| I certify finance a  | activity, including contributions, loans, receipts, expenditures, disbursements in finance activity of all persons acting under the authority or on behalf of this | be best of my knowledge and belief, a true and complete statement of all campaigns, 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   | r the penalties of perjury: Jane Morym   | (Candidate's signature) Date: 1/3/2023   |  |  |  |

## 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: Receipte" 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             |   | Occupation & Employer  |
|--|--|---|--|
| Date Received  | (alphabetical listing required)          | Amount                                  | (for contributions of \$200 or more)   |
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| ine 9: Total Rece  | ipts over \$50 (or listed above)         | 0                                       |  |
|  |  |   | 1  |
| ine 10: Total Rece   | eipts \$50 and under* (not listed above) | 1                                       |  |
|  |  |   |  |
| ine 11: TOTAL I  | RECEIPTS 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) |
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| Line 9: Total Receip | ots over \$50 (or listed above)                              | d  |  |
| Line 10: Total Recei | pts \$50 and under* (not listed above)                       |  |  |
| Line 11: TOTAL R     | ECEIPTS IN THE PERIOD  | d  | ← Enter on page 1, line 2                                  |
|                      |  | L  | Id 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 report all expenditures. Please include your committee name and a page number on each page.)

|  | To Whom Paid                          | The state of the s |                        |        |
|--|---------------------------------------|--|------------------------|--------|
| Date Paid  | (alphabetical listing)                | Address  | Purpose of Expenditure | Amount |
|  |                                       |  |                        |        |
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|  |                                       | 1  |                        |        |
| Line 12: Total Expenditures over \$50 (or listed above)  |                                       |  |                        |        |
|  |                                       |  |                        |        |
| Line 13: Total Expenditures \$50 and under* (not listed above)   |                                       |  |                        |        |
|  |                                       |  |                        |        |
|  | Enter on page 1, line $4 \rightarrow$ | Line 14: TOTAL EXPENDIT  | URES 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.

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