

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

Commonwealth of Massachusetts			[[File with	122 JAN 20 P	il L: 3L, or Election Commission
Fill in Reporting Period dates:	Beginning Date: 01/01	/2021	Ending Date:	12/31/2021	
Type of Report: (Check one)				REGEN	7 (v. 1) b
8th day preceding preliminary	8th day preceding election	30 day a	fter election 🔀	year-end report	dissolution
Elizabeth Exton Candidate Full Name (i	f applicable)	Committe	ee to Elect Elizabeth E Com	Exton mittee Name	
School Committee Office Sought and	District	Jason Kal		ommittee Treasurer	<u> </u>
231 Washington St. Arlington, MA 0243		231 Wash	nington St. Arlington,		
Residential Add				c Mailing Address	
E-mail: liz.exton@g	mail.com	E-mail:	jasor	n.kahn@gmail.con	n
Phone # (optional): 61	72167152	Phone # (op	tional):	6172305659	-
	SUMMARY BALANC	E INFOR	MATION:		
Line 1: Ending Balan	nce from previous report			323.1	11
Line 2: Total receipt	s this period (page 3, line 11)			0.0	00
Line 3: Subtotal (line	e I plus line 2)			323.1	(1
Line 4: Total expend	litures this period (page 5, line	e 14) [300 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.0	00
Line 5: Ending Balan	nce (line 3 minus line 4)		SALDIEL WALLEY V.	323.1	(1
Line 6: Total in-kind	l contributions this period (page	ge 6)	MA II	0.0	00
Line 7: Total (all) ou	utstanding liabilities (page 7)		1.1	271.7	72
Line 8: Name of ban	k(s) used: Leader Bank	r- other speeds of			
Affidavit of Committee Treasurer: I certify that I have examined this report including activity, including all contributions, loans, receipt finance activity of all persons acting under the aut Signed under the penalties of perjury:	s, expenditures, disbursements, in-kind c	ontributions an	d liabilities for this reporti	ing period and represe i.L. c. 55.	
FOR CANDIDATE FILINGS ONLY	. Affidavit of Condidates (about 1 hos	v 0=h1)		-	£2.55 10 (40)
Candidate with Committee I certify that I have examined this report include activity, of all persons acting under the author incurred any liabilities nor made any expendit Candidate without Committee I certify that I have examined this report including contributions, loan	uding attached schedules and it is, to the ority or on behalf of this committee in accitures on my behalf during this reporting uding attached schedules and it is, to the ns, receipts, expenditures, disbursements	best of my kno cordance with t period that are best of my kno , in-kind contri	he requirements of M.G.L. not otherwise disclosed in owledge and belief, a true a butions and liabilities for t	. c. 55. I have not recont this report. and complete statementhis reporting period ar	eived any contributions, nt of all campaign nd represents the
campaign finance activity of all persons actir Signed under the penalties of periury:	ing under the authority or on behalf of this Elizabeth R Elizabeth	s candidate in a	ccordance with the require	Date: 0	5. 01/18 / 2022

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	rurpose	Amount
5/4/2020	Jason Kahn	231 Washington St. Arlington, MA 02474	mass email provider	\$42.44
./31/2020	Jason Kahn	231 Washington St. Arlington, MA 02474	website hosting	\$229.28
1-41				
	The state of the s			
		→ Line 18: TOTAL OUTSTAN		271.72

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
				10000
				i annum kani ji kure
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line $6 \rightarrow$	→ 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.

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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	1111 1 manuses 11.4			
		The state of the s		
		-		
		Line 12: Expenditures over	r \$50 (or listed above)	
		Line 13: Expenditures \$50	and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14. TOTAL EXPEN	DITURES IN THE PERIOD	

^{*} 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

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	(alphabetical listing)	Address	Turpose of Expenditure	Amount
			- Francisco - Fran	
	- NAME (A. A.A.)			
		-		
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		1111		
		1		
		Time 12. W-(1. P	050 (lists 1 1)	
		Line 12: Total Expenditure	s over \$50 (or listed above)	
		Line 13: Total Expenditures	\$50 and under* (not listed above)	
	Enter on page 1, line 4 =	Line 14: TOTAL EXPEN	DITURES IN THE PERIOD	Action in the second

^{*} 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
		Videosophalepare	
	- Couling to the country of the coun		
	- Anna Control		73 Land
	A CONTRACTOR OF THE CONTRACTOR		100000000000000000000000000000000000000
			- Harris Alaria - Ala
	- AND SQUARE CO.		
	1 Line College		-0-1993999
	The state of the s		
	TOO HART III		
	Annual and		Made Laden ; Training
	-11		
	- Control of the Cont		
	and the second s		
ine 9: Total Receip	ots over \$50 (or listed above)		
- Danie) - To	pts \$50 and under* (not listed above)		
	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 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.)

n , n	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
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			10.000 million and 10.000 millio
ne 9: Total Receir	ots over \$50 (or listed above)		
	(27 112 20 (07 112 20) (07 112 20		
ne 10: Total Recei	pts \$50 and under* (not listed above)		
	` '		
11. TOTAL D	ECEIPTS IN THE PERIOD	A CONTRACTOR OF THE CONTRACTOR	← 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.