

Signed under the penalties of perjury:

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

Office of Campaign and Political Finance

MAY 9 2022 PM 1:25

of Massachuseus	File with: City or Town Clerk or Election Commission	
Fill in Reporting Period dates: Beginning Date:	2-22 Ending Date: $5-9-22$	
Type of Report: (Check one)		
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution	
Katherine A. Kelly-Reagh		
Candidate Full Name (if applicable)	Committee Name	
Town clerk		
Office Sought and District	Name of Committee Treasurer	
Residential Address	Committee Mailing Address	
,	t .	
Telephone Number (optional):	Telephone Number (optional):	
SUMMARY BALANCE INFORMATION:		
Line 1: Ending Balance from previous report		
Line 2: Total receipts this period (page 3, line 11)		
Line 3: Subtotal (line 1 plus line 2)		
Line 4: Total expenditures this period (page 5, line 14)		
Line 5: Ending Balance (line 3 minus line 4)		
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.		
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 committee in accordance with the requirements of M.G.L. c. 55.		

(Candidate's signature)



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of Massachusetts	File with: City or Town Clerk or Election Commission	
Fill in Reporting Period dates: Beginning Date: 3	Ending Date: 5/9/3	
Type of Report: (Check one)	•	
	☐ 30 day after election ☐ year-end report ☐ dissolution	
	Committee Name	
Candidate Full Name (if applicable)  No land Device III	Committee Name	
Office Sought and District	Name of Committee Treasurer	
ASSESSUCS		
10 Cedar Residential Address Canby MA	Committee Mailing Address	
Telephone Number (optional):	Telephone Number (optional):	
SUMMARY BALANC	E INFORMATION:	
Line 1: Ending Balance from previous report	<i>F</i> )	
Line 2: Total receipts this period (page 3, line 11)		
Line 3: Subtotal (line 1 plus line 2)		
Line 4: Total expenditures this period (page 5, lin	e 14)	
Line 5: Ending Balance (line 3 minus line 4)		
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.		
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 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 committee in accordance with the requirements of M.G.L. c. 55.		
Date: it is G 7022		



## 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:	3/28/22 Ending Date: $5/9/22$	
Type of Report: (Check one)		
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution	
Planning Roard		
Candidate Full Name (if applicable)  Melissa M. St. Ormain – Martel	Committee Name	
Office Sought and District	Name of Committee Treasurer	
Residential Address	Committee Mailing Address	
Telephone Number (optional): (4/3) 433-7256	Telephone Number (optional):	
SUMMARY BALAN	NCE INFORMATION:	
Line 1: Ending Balance from previous report		
Line 2: Total receipts this period (page 3, line	11)	
Line 3: Subtotal (line 1 plus line 2)		
Line 4: Total expenditures this period (page 5,	line 14)	
Line 5: Ending Balance (line 3 minus line 4)		
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 an 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.		
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 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 I certify that I have examined this reporting period and represents the finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the 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.  Date:		
Signed under the penalties of perjury:	(Candidate's signature)	



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Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission	
Fill in Reporting Period dates: Beginning Date:	2-22 Ending Date: 5-9-22	
Type of Report: (Check one)		
8th day preceding preliminary 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution	
Candidate Full Name (if applicable)	Committee Name	
Helen 2 Hurteau		
Office Sought and District	Name of Committee Treasurer	
ibrary Trustee		
21 Bay Jan Residential Address	Committee Mailing Address	
Telephone Number (optional):	Telephone Number (optional):	
SUMMARY BALANCI	F INFORMATION:	
Line 1: Ending Balance from previous report		
Line 2: Total receipts this period (page 3, line 11)		
Line 3: Subtotal (line 1 plus line 2)		
Line 4: Total expenditures this period (page 5, line 14)		
Line 5: Ending Balance (line 3 minus line 4)		
Line 6: Total in-kind contributions this period (page	ge 6)	
Line 7: Total (all) outstanding liabilities (page 7)		
Line 8: Name of bank(s) used:		
Affidavit of Committee Treasurer:	, , , , ,	
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.  Date:		
Signed under the penalties of perjury: (Treasurer's signature)		
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.		
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 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 ampaign 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:	(Candidate's signature) Date: 3/20/2022	