

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

			F	ile with: City or	<u>Γown Clerk</u>	or Election Commission
Fill in Reporting Period dates: Beginning	Date: <u>1-1-20</u>	22	Ending D	ate: 12	2-31-2022	2
Type of Report: (Check one)						
8th day preceding preliminary 8th day prece	ding election	30 day afte	r election	year-end	report	dissolution
Heather Louise Shand						
Candidate Full Name (if applicable)				Committee Nan	ne	
Ward 3 City Councilor, Newburyport		Brian Krisler		e of Committee T		
Office Sought and District 43 Warren Street		18 Boardma		e of Committee 1	reasurer	
Residential Address		10 Doditilla		nmittee Mailing A	Address	
E-mail: heather.shand@gmail.com		E-mail:		bkrisler@bk		
Phone # (optional):		Phone # (option	nal):	<del></del>		
SUMMAI	Y BALANCE	E INFORM	IATION:			
Line 1: Ending Balance from previous	ous report				936.4	2
Line 2: Total receipts this period (p	age 3, line 11)					Ō
Line 3: Subtotal (line 1 plus line 2)						0
Line 4: Total expenditures this per	od (page 5, line	14)				0
Line 5: Ending Balance (line 3 min	us line 4)				936.4	2
Line 6: Total in-kind contributions	this period (pag	ge 6)				0
Line 7: Total (all) outstanding liab	4 5 7					0
Line 8: Name of bank(s) used: New	ouryport Bank					
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules activity, including all contributions, loans, receipts, expenditures, disfinance activity of all persons acting under the authority or on behalf Signed under the penalties of perjury:	ursements, in-kind co	ntributions and li	abilities for this	reporting period a f M.G.L. c. 55.	and represen	
FOR CANDIDATE FILINGS ONLY: Affidavit of Car	didate: (check 1 box	only)				
Candidate with Committee  I certify that I have examined this report including attached sche activity, of all persons acting under the authority or on behalf of incurred any liabilities nor made any expenditures on my behalf	lules and it is, to the b	pest of my knowled	requirements of I	M.G.L. с. 55. Ì hа	ive not recei	
Candidate without Committee  I certify that I have examined this report including attached sche finance activity, including contributions, loans, receipts, expendical campaign finance activity of all persons acting under the authoric	ures, disbursements, i y or on behalf of this	in-kind contributi	ons and liabilitie	s for this reportin	g period and	d represents the
Signed under the penalties of perjury:	2 Shand		(Candidate's	signature)	Date:	January 19, 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: 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	Occupation & Employer		
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
1				
			1	
			1	
			J  L	
ine 9: Total Recei	pts over \$50 (or listed above)			
ina 10. Tatal Day	into \$50 and undow* (not lists delicated		1	
ine 10: 10tal Kece	ipts \$50 and under* (not listed above)			
ine 11: TOTAL F	RECEIPTS IN THE PERIOD		☐ Enter on page 1, line 2	
		0 1: 10 1	ld 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 A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(aiphabeteal fisting required)	Amount	(101 Contributions of \$200 of more)
Line 9: Total Rece	ipts over \$50 (or listed above)		
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL I	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
		2 0 Line 10 shou	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					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
			J		
			7		
		Line 12: Total Expenditures o	ver \$50 (or listed above)		
		Line 12. Total Expellultures 0	701 \$50 (01 listed above)		
		Line 13: Total Expenditures \$5	50 and under* (not listed above)		
			, ,		
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	TURES 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.

Page 4

## **SCHEDULE B: EXPENDITURES (continued)**

Date Paid (alphabetical listing) Address Purpose of Expenditure Amount    Amount	To Whom Paid					
Line 12: Expenditures over \$50 (or listed above)  Line 13: Expenditures \$50 and under* (not listed above)	Date Paid		Address	Purpose of Expenditure	Amount	
Line 13: Expenditures \$50 and under* (not listed above)						
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Line 13: Expenditures \$50 and under* (not listed above)						
Line 13: Expenditures \$50 and under* (not listed above)			Line 12: Expenditures over \$50	) (or listed above)		
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES 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.

## 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	
-		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 $6 \rightarrow$	5 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			

<sup>\*</sup> 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
		Line 18: TOTAL OUTSTANI		