

Form CPF M 102: Campaign Finance Report

Municipal Form
Office of Campaign and Political Finance

TOWN OF NORWELL TOWN CLERK

01 1	viassachu
Fil	e with:

y or Town Clerk or Election Commission Pic	ease print of type		m, except sign		RECE	VED	
Fill in dates: Reporting Period Beginning 5	Date 9	Year 14	Ending _	Month	Date / C	Year	
Type of report: (Check one) ☐8th day preceding preliminary ☐8t	h day preceding e	election 🗹	30 day after el	ection	□year-end re	port 🗆 dis	solution
Kierten Worlenders Full Name of Candidate (if ap School Committee	plicable)	Cor	nmilke Jeann	Committe ~ B2	ee Name	iesten	
Office Sought and Distr Residential Address	ict	_	8 Henri	sal '	ittee Treasure Dove 1 ailing Address	Wwell	_
	Tel. No. (optional				T	el. No. (option	al)
Line 1: Ending be Line 2: Total reconstruction Line 3: Subtotal of Line 4: Total exp Line 5: Ending be Line 6: Total in-king Line 7: Total (all) Line 8: Name of be Affidavit of Committee Treasurer:	eipts this pe (line 1 plus line 2) enditures the alance (line 3) and contribut outstanding ank(s) used_	previou riod (page) nis period minus line 4) ions this liabilitie	report 2, line 11) (page 3, line period (page 4) (page 4)	ge 4)	nd belief, a true	and complete s	tatement of al
campaign finance activity, including all contribution and represents the campaign finance activity of	stione loans receipts	, expenditures, ader the author	disbursements, in ty or on behalf o	-kind conti	idunons and nac	diffines for mire in	chorning berior
FOR CAN	DIDATE FILING	GS ONLY:	CANDIDATE M	IUST SIG	N BELOW)		
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity. I certify that I have examined this report inclucampaign finance activity, of all persons actin have not received any contributions, incurred an Candidate without Committee OR Candid I certify that I have examined this report inclucampaign finance activity, including contribut and represents the campaign finance activity of M.G.L. c. 55.	ding attached schedu- ng under the authority ny liabilities nor made date with independer ding attached schedu- tions loans receipts	les and it is, to y or on behalf of e any expenditu at activity filingules and it is, to expenditures, d ander the author	res on my behalf g separate repor the best of my k isbursements, in- ity or on behalf of	e in according this of the contribution of this contribution of this contribution of the contribution of t	reporting period. and belief, a true butions and liab	and complete s ilities for this re lance with the re	tatement of all

SCHEDULE A: RECEIPTS

M.G.L. c. 55 equires 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.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

number on each page.

Date	Name and Residential Address	Amount		Occupation & Employer		
Received	(alphabetical listing required)			(for contributions of \$200 or more		
5/15/14	Knssy Majune	50				
01.01.1	Deta Basantine Nonell	50	-			
5/5/14	(alphabetical listing required) Knssy Majure 100 Bosantone Noville Party Hiskuy	100				
	Jeaner Buser					
	Kiersten Warendarf 49 Lincoln Shreit	50				
	Kiersten Worendorf	120	Character			
	49 Lincoln Shreit					
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		27		33		
			2			
Line 9: T	otal receipts in excess of \$50 (or listed above)	320				
Line 10: T	otal receipts \$50 and under* (not listed above)	25	_			
Line 11: T	OTAL RECEIPTS IN THE PERIOD	345		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 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
5/15/19	Werdy. Bawabe		Postage for mailings	24.82
			7	TOWN C
				N CLERK
			Control of the Contro	33
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	24.82
	Enter on page 1, line 6	Line 17:	Total In-kind	24.82

^{*} 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.

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			Purpose	Amount
Incurred				
5/11/14	David English	972 Washington St Hanner ma	Addidumil	116.25
,		•,		
		,		
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	116.25

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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