

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED

JUN 2 1 2022

OI Magaga Musacus	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: May 4, 2022	Ending Date: lown Clerk's Office-Whitman June 10, 2022 Whitman File No
Type of Report: (Check one)	
	y after election year-end report dissolution
CHARLES R. SLAVIN III	
Candidate Full Name (if applicable) W. SCHOOL COMMITTEE	Committee Name
12 COMMERCIAL ST.	Name of Committee Treasurer
Residential Address E-mail: CHUCK SULTINGME. COM E-mail:	Committee Mailing Address
Phone # (optional): 781.789.3145 Phone # (optional):	optional):
SUMMARY BALANCE INFO	RMATION:
Line 1: Ending Balance from previous report	8
Line 2: Total receipts this period (page 3, line 11)	244.38
Line 3: Subtotal (line 1 plus line 2)	244.38
Line 4: Total expenditures this period (page 5, line 14)	244.38
Line 5: Ending Balance (line 3 minus line 4)	8
Line 6: Total in-kind contributions this period (page 6)	8
Line 7: Total (all) outstanding liabilities (page 7)	8
Line 8: Name of bank(s) used:	
Affidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best of my knowle ctivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions a inance activity of all persons acting under the authority or on behalf of this committee in accordance with	and liabilities for this reporting period and represents the campaign
igned 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 kn activity, of all persons acting under the authority or on behalf of this committee in accordance with incurred any liabilities nor made any expenditures on my behalf during this reporting period that are	the requirements of M.G.L. c. 55. I have not received any contributions.
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the best of my kn finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions campaign finance activity of all persons acting under the authority or on behalf of this candidate in	ibutions and liabilities for this reporting period and represents the
Igned under the penalties of perjury:	(Candidate's signature) Date: 06/21/22

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

ort all receints. Please include your committee name and a page number on each page.)

206,06

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Jate Received	(aiphabetical listing required)	7xmount	
		<u> </u>	
		<u> </u>	
Line 9: Total Rece	ipts over \$50 (or listed above)		
ine 10: Total Rec	eipts \$50 and under* (not listed above)		
ine 11: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
05/13/22	CHANCES R SLAVIN FF	244.38	SIGNS
Line 9: Total Receip	ts over \$50 (or listed above)	244.38	
Line 10: Total Receip	ots \$50 and under* (not listed above)	8	
	ECEIPTS IN THE PERIOD	244.38	← Enter on page 1, line 2 I include only those receipts not itemized above.

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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

above.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Palo	(aiphabetical fisting)	Audiess	Turpose of Europe	
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	B

Page 4

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
05/13/22	EAST COAST PRENTENG	2 ICETH WAY HINGHAM, MA 02043	SIGNS	244.38
THE CONTRACTOR OF THE CONTRACT				
		Line 12: Expenditures over \$50	(or listed above)	24438
		Line 13: Expenditures \$50 and u	nder* (not listed above)	Ø
If you have itemiz		Line 14: TOTAL EXPENDITU	URES IN THE PERIOD ould include only those expenditures	244.38

^{*} 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.

Data Dandara	From Whom Received*	Residential Address	Description of Contribution	Value
Date Received	FIORI WHOM Received.	Acouchtal Address	- Continue of Continue of	
44				
	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 →			

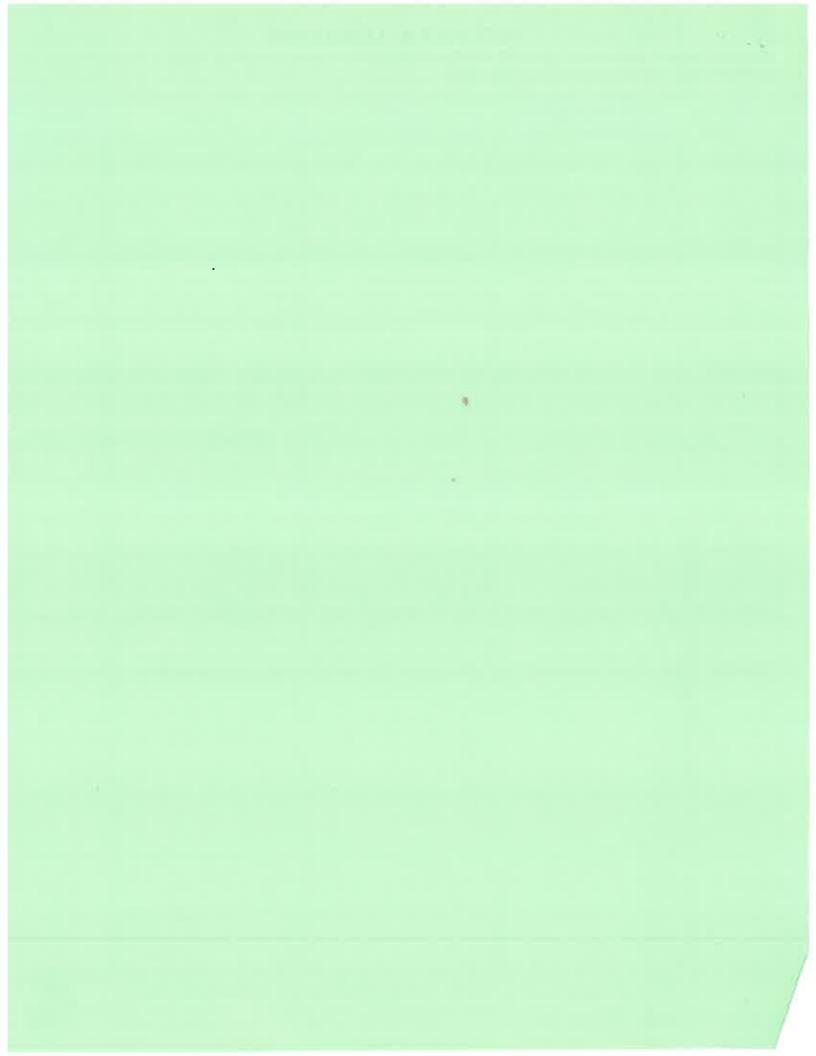
^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE 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
10 (1) (1)				
		Line 18: TOTAL OUTSTAND	NAC LIA DIVI	





East Coast Printing

2 Keith Way, Unit 5 Hingham, MA 02043 781-875-1020

Invoice

No: 91544

Date: 5/13/22

Customer PO:

Committee To Elect Chuck Slavin

Quantity	Description		Amount
2	4x8 Coroplast Signs - 1 SIDED		\$ 230.00
	•		
			į
1			
		SUBTOTAL	\$ 230.00
Thank you for	your business!		
	ayment is appreciated.	TAX	\$ 14.38
Places senter	t us at 781.875.1982 if there	SHIPPING	\$ 0.00
	rus at 781.875.1982 ir there ons regarding balances	DEPOSITS	\$ 0.00
shown below.		TOTAL	\$ 244.38
		AMOUNT DUE	\$ 244.38

Current	31 - 60 Days	61 90 Days	Over 90 Days	Total Due
0.00	0.00	0.00	0.00	244.38