

Form CPF M 102: Campaign Finance Report Municipal Form

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nehusetts			2012 JUN 13	PH 1: 34	·.		
th: Town Clerk or Election Commission Please p	rint or type all information	ı, except signatı). MASS	· .		
Il in dates:	Date Year 7 12	Ending	fonth Date 2	/ <u>Year</u>			
ype of report: (Check one) 8th day preceding preliminary □8th day	preceding election) day after elect	ion □year-end	report disso	olution		
Full Name of Candidate (if applicab			mmittee Name		-		
KENNEY4 C EVANS NO		No	ONE				
BOAKS OF HEAL	84	Name of	Committee Treas	irer ,			
Residential Address				Committee Mailing Address			
Tel. 1	Vo. (optional)	, .		Tel. No. (optiona	1)		
Line 3: Subtotal (line 1 Line 4: Total expendi Line 5: Ending balan	itures this period ce (line 3 minus line 4)		\$ <u>\(\O_{\O}_{\O}_{\O}_{\O}_{\O}_{\O}_{\O}_{\</u>				
Line 6: Total in-kind c) \$				
Line 7: Total (all) outs	To take the SV of the Cartesian Control of the	(page 4)	<u>ئے۔۔۔۔</u> سے ارد ک		•		
Line 8: Name of bank(s) used		NE				
ffidavit of Committee Treasurer: certify that I have examined this report including atta impaign finance activity, including all contributions, I id represents the campaign finance activity of all per i.G.L. c. 55. Signed	oans, receints, expenditures, dis	or on behalf of the	i contributions and I	iadinties for this repo	orung per		
reasurer's signature (in ink)			Date		•		
FOR CANDIDA	TE FILINGS ONLY: (CA	NDIDATE MUST	SIGN BELOW)				
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity indeperture of the certify that I have examined this report including attacks.	endent of the committee	a hast of my knowl	adge and helief a tr	ne and complete stat	ement of		

☐ Candidate with Committee and no activity independent of the 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.
have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.
Candidate without Committee OR Candidate with independent activity filing separate report
Capping will must Committee Ox Canada and the Capping Committee of the statement of old
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 al
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
MCI of Signed under the penalties of perjury:
M.G.L.C. 35.
Kenchlo Ctobus 6/13/2012
June Court
M.G.L. c. \$5. Signed under the penalties of perjury: Candidate signature (in ink) Signed under the penalties of perjury: [



Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

with: or Town Clerk or Election Commission Please print or	type all informat	ion except sign	natures				
	type an informat		latures.		·		
Fill in dates: Reporting Period Beginning 5 3	12_	Ending	Month 2	Date 31	Year 1 2		
Type of report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preced	ling election	l30 day after el	ection X	year-end repo	ort		
Kenneth C. Evans				<u> </u>			
Full Name of Candidate (if applicable) Board Of Health		Committee Name					
Office Sought and District SEVANS RO		Name of Committee Treasurer					
Residential Address		Committee Mailing Address					
Tel. No. (opt	ional)			Tel.	No. (optional)		
Line 1: Ending balance from Line 2: Total receipts this Line 3: Subtotal (line 1 plus line 4: Total expenditure: Line 5: Ending balance (line Line 6: Total in-kind contribution from Ending balance (line 7: Total (all) outstanding Line 8: Name of bank(s) use fildavit of Committee Treasurer: Certify that I have examined this report including attached schempaign finance activity, including all contributions, loans, record represents the campaign finance activity of all persons activity of all persons activity of all persons activity.	period (page ne 2) s this period ne 3 minus line 4 butions this ng liabilitie ed	s report 2, line 11) d (page 3, line) period (page S (page 4) the best of my kno disbursements, in-k ty or on behalf of	\$	ons and liabiliti	es for this reporting peri		
FOR CANDIDATE FIL	INGS ONLY: (CANDIDATE MU	ST SIGN BE	LOW)			
Affidavit of Candidate: (check I box only) Candidate with Committee and no activity independent of certify that I have examined this report including attached solution ampaign finance activity, of all persons acting under the author of the certify that I have examined this report including attached solutions finance activity, including contributions, loans, received ampaign finance activity, including contributions, loans, received represents the campaign finance activity of all persons activity. Including contributions activity of all persons activity. Including contributions activity of all persons activity.	nedules and it is, to to correct or on behalf or made any expenditured and activity filing nedules and it is, to tops, expenditures, dients, expenditures, dients, expenditures, dients, expenditures, to tops, expenditures, dients, expenditures, expendit	f this committee it es on my behalf du separate report the best of my kno sbursements, in-kit or on behalf of	n accordance ring this repor wledge and be nd contribution	with the require ting period. lief, a true and is and liabilities	ments of M.G.L. c. 55. complete statement of a s for this reporting perio		
Candidate signafure (in ink)				Date			