

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

OI Wassachuseus	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 3/30/2	2021 Ending Date: 5/6/2021
Type of Report: (Check one)  [ 8th day preceding preliminary	⊠ 30 day after election
Meghan Hornberger  Candidate Full Name (if applicable)  Municipal, Local Filer - Milford School Committee  Office Sought and District  51 Briar Dr Milford, MA 01757  Residential Address  E-mail: meghornberger12@gmail.com  Phone # (optional):	Committee to Elect Meghan Hornberger  Committee Name  Carly Kearnan  Name of Committee Treasurer  27 Littlefield Rd Milford, MA 01757  Committee Mailing Address  E-mail:  Phone # (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	463.69
Line 2: Total receipts this period (page 3, line 11)	250.00
Line 3: Subtotal (line 1 plus line 2)	713.69
Line 4: Total expenditures this period (page 5, lin	ue 14)
Line 5: Ending Balance (line 3 minus line 4)	713.69
Line 6: Total in-kind contributions this period (pa	age 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: Middlesex Savings B	Bank
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo  Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in activity, of all persons acting under the authority or on behalf of this committee in activity and liabilities nor made any expenditures on my behalf during this reporting	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date: 5/7/2/   The property of the campaign finance confidence with 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 finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of thi	s, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury: Meshan Unable	Date: 5/7/2121

#### **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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4/1/2021	Mr. Ted Giblin 39 Howard St. Verona, NJ	50	
4/2/2021	Mr. & Mrs. Wendell Philips 8 Lantern Ln Milford, MA 01757	100	
4/4/2021	Mr. & Mrs. John Pyne Jr. 63 Shadow Brook Estate South Hadley, MA 01075	100	
ine 9: Total Rece	ipts over \$50 (or listed above)	250	
ine 10: Total Rece	eipts \$50 and under* (not listed above)	0	
ine 11: TOTAL l	RECEIPTS IN THE PERIOD	250	← Enter on page 1, line 2

<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)**

Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)
Jaco Received	(a.p.a.bettear insting required)	Amount	(101 CONTINUEDUS OF \$200 OF MOTE)
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ne 9: Total Receir	ats over \$50 (or listed above)		
	ots \$50 and under* (not listed above)		
			4
ne 11: TOTAL R	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<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.)

eport 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
= 1				
11				
- 111				
(1)				l
[]]				
		20.		
		Line 12: Total Expenditures ov	er \$50 (or listed above)	
Line 13: Total Expenditures \$50 and under* (not list			and under* (not 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.

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

To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
				10.
1				
		Line 12: Expenditures over \$50	(or listed above)	
		T 12 F	1 4 / 11 . 1 1	
		Line 13: Expenditures \$50 and	under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	
			hould include only those expenditure	

<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
				<u> </u>
1,1		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 → 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.

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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
				= ::
	Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)			