

Townsend

*Please print or type all information, except signatures.*

Beginning:

1/25/2021

(MM/DD/YYYY)

Ending:

4/18/2002

(MM/DD/YYYY)

☐ 8th day preceding preliminary/primary    ☐ 8th day preceding election    ☐ 30th day following election (town or special)    ☐ 20th day of January (Year-End report)

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]





Commonwealth  
of Massachusetts

*Please print or type all information, except signatures.*

City or Town of: Townsend

Reporting Period: Beginning: 1-1-2020 Ending: 12-31-2020  
(MM/DD/YYYY) (MM/DD/YYYY)

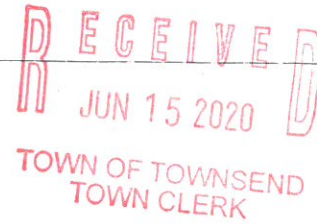
☐ 8th day preceding preliminary/primary    ☐ 8th day preceding election    ☐ 30th day following election (town or special)    ☒ 20th day of January (Year-End report)

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]

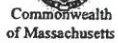
[illegible]





*Please print or type all information, except signatures.*

[illegible]



City or Town of: Townsend

*Please print or type all information, except signatures.*

Reporting Period: Beginning: January 2020 Ending: 6/21/20  
(MM/DD/YYYY) (MM/DD/YYYY)

☐ 8th day preceding preliminary/primary    ☒ 8th day preceding election    ☐ 30th day following election (town or special)    ☐ 20th day of January (Year-End report)

1. I certify that I am a candidate for or currently hold Municipal Office.
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3. I certify that I do not have a political committee.

[illegible]





2

April 19 / 2020

10071

☐ 20th day of January (Year-End report)

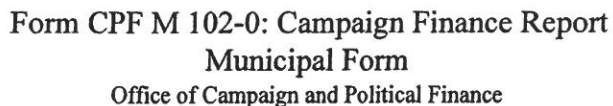
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.

3. I certify that I do not have a political committee.

OFFICE SOUGHT

[illegible]

Rec'd Townsend Town Office



*Please print or type all information, except signatures.*

City or Town of: Townsend

Reporting Period: Beginning: January 10, 2020 Ending: April 17, 2020  
(MM/DD/YYYY) (MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary    ☒ 8th day preceding election    ☐ 30th day following election (town or special)    ☐ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]





## Office of Campaign and Political Finance

TOWN OF TOWNSEND  
TOWN CLERK

City or Town of: Townsend

Reporting Period: Beginning: 1/13/2020 Ending: 6-21-2020  
(MM/DD/YYYY) (MM/DD/YYYY)

☐ 8th day preceding preliminary/primary    ☒ 8th day preceding election    ☐ 30th day following election (town or special)    ☐ 20th day of January (Year-End report)

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Rec'd Townsend Town Clerk  
24 JUL '20 PM 12:56

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

2/17/2020

Ending Date:

7/24/2020

Type of Report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☒ 30 day after election

☐ year-end report

☐ dissolution

VERONICA A KELL

Candidate Full Name (if applicable)

SELECTMAN

Office Sought and District

68 MEADOW RD, TOWNSEND, MA 01469

Residential Address

Telephone Number (optional):

n/a

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 11)

967.00

Line 3: Subtotal (line 1 plus line 2)

967.00

Line 4: Total expenditures this period (page 5, line 14)

967.00

Line 5: Ending Balance (line 3 minus line 4)

0

Line 6: Total in-kind contributions this period (page 6)

n/a

Line 7: Total (all) outstanding liabilities (page 7)

n/a

Line 8: Name of bank(s) used:

### Affidavit of Committee Treasurer:

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, including all 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 M.G.L. c. 55.

Signed under the penalties of perjury:

(Treasurer's signature)

Date:

### FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

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. I 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

☒ 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, 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 M.G.L. c. 55.

Signed under the penalties of perjury:

Veronica A. Kell

(Candidate's signature)

Date:

7/24/2020

## 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)
2/17/2020	VERONICA KELL 68 MEADOW RD, TOWNSEND	344.85	Retired
3/9/2020	"	393.59	"
4/14/2020	"	142.42	"
4/14/2020	"	24.19	"
6/6/2020	"	35.00	"
4/18/2020	"	26.95	"

Line 9: Total Receipts over \$50 (or listed above)

\$967.00

Line 10: Total Receipts \$50 and under\* (not listed above)

—

Line 11: TOTAL RECEIPTS IN THE PERIOD

\$967.00

← 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 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.)

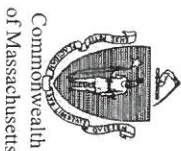
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
2/17/2020	STAPLES	124 ROUTE 101A SUITE B AMHERST, NH 03031	Signs	344.85
3/9/2020	STAPLES	124 ROUTE 101A SUITE B AMHERST, NH 03031	Signs & Business Cards	393.59
4/14/2020	STAPLES	124 ROUTE 101A SUITE B AMHERST, NH 03031	Signs	142.42
4/14/2020	STAPLES	124 ROUTE 101A SUITE B AMHERST, NH 03031	POSTCARDS	24.19
6/6/2020	USPS	227 MAIN ST TOWNSEND, MA 01469	POST CARD STAMPS	35.00
4/18/2020	USPS	USPS - COM POSTAL ST 800-782-6724 MO	POST CARD STAMPS	26.95
Line 12: Total Expenditures over \$50 (or listed above)				\$ 967.00
Line 13: Total Expenditures \$50 and under* (not listed above)				—
Line 14: TOTAL EXPENDITURES IN THE PERIOD				967.00

Enter on page 1, line 4 →

\* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

[illegible]





Commonwealth  
of Massachusetts

# Form CPF M 102-0: Campaign Finance Report

## Municipal Form

Office of Campaign and Political Finance

RECEIVED  
JUL 29 2020

City or Town of:

Townsend

Reporting Period:

Beginning: June 29, 2020  
(MM/DD/YYYY)

Ending: July 29, 2020  
(MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary

☐ 8th day preceding election

☒ 30th day following election (town or special)

☐ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE

PRINT NAME

SIGNATURE  
Signed under the penalties of perjury

RESIDENTIAL ADDRESS  
(Street and Number)

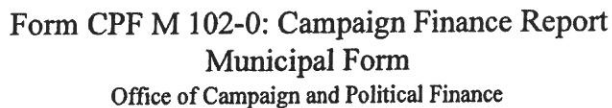
OFFICE Sought

7/29/20

Julie Byars

9 Gilchrist Road

B. of Assessors



City or Town of:

Townsend

Reporting Period:

**Beginning:**

April 17, 2020  
(MM/DD/YYYY)

**Ending:**

May 27, 2020 (MM/DD/YY)

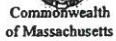
Type of Report: (Check One)

☐ 8th day preceding preliminary/primary☐ 8th day preceding election☒ 30th day following election (town or special)☐ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]



Form CPF M 102-0: Campaign Finance Report  
Municipal Form  
Office of Campaign and Political Finance

*Please print or type all information, except signatures.*

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary    ☐ 8th day preceding election    ☒ 30th day following election (town or special)    ☐ 20th day of January (Year-End report)

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]





TOWNSEND  
TOWN CLERK

## Office of Campaign and Political Finance

Please print or type all information, except signatures.

Ending: 06/29/2020

(MM/DD/YYYY)

☐ 20th day of January (Year-End report)

2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.

3. I certify that I do not have a political committee.

[illegible]



Commonwealth  
of Massachusetts

Form CPF M 102-0: Campaign Finance Report  
Municipal Form  
Office of Campaign and Political Finance

City or Town of: Townsend

Please print or type all information, except signatures.

Reporting Period: Beginning: 6-29-2020  
(MM/DD/YYYY)

Ending: 7-29-2020  
(MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary    ☐ 8th day preceding election    ☐ 30th day following election (town or special)    ☐ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]





# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Rec'd Townsend Town Clerk  
19 JAN '21 AM 9:47

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

Dec 1 2020

Ending Date:

Jan 23 2021

Type of Report: (Check one)

☒ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

Joseph Shank

Candidate Full Name (if applicable)

Selectmen

Office Sought and District

27 TURNER RD

Residential Address

Telephone Number (optional):

978 597 8939

Selectmen

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

- 0 -

Line 2: Total receipts this period (page 3, line 11)

729.94

Line 3: Subtotal (line 1 plus line 2)

729.94

Line 4: Total expenditures this period (page 5, line 14)

729.94

Line 5: Ending Balance (line 3 minus line 4)

- 0 -

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used:

### Affidavit of Committee Treasurer:

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, including all 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 M.G.L. c. 55.

Signed under the penalties of perjury:

(Treasurer's signature)

Date:

### FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

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. I 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

☒ 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, 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 M.G.L. c. 55.

Signed under the penalties of perjury:

Joseph Z Shank

(Candidate's signature)

Date:

1-14-21

## 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.)

[illegible]

Line 9: Total Receipts over \$50 (or listed above)

729.94

Line 10: Total Receipts \$50 and under\* (not listed above)

- 0 -

**Line 11: TOTAL RECEIPTS IN THE PERIOD**

729.54

← 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 A: RECEIPTS (continued)**[illegible]

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under\* (not listed above)

**Line 11: TOTAL RECEIPTS IN THE PERIOD**

← 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 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.)

[illegible]

Line 12: Total Expenditures over \$50 (or listed above)

729.94

**Line 13: Total Expenditures \$50 and under\* (not listed above)**

-0-

Enter on page 1, line 4 →

**Line 14: TOTAL EXPENDITURES IN THE PERIOD**

729.94

\* 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 B: EXPENDITURES (continued)**[illegible]

Enter on page 1, line 4 →

Line 12: Expenditures over \$50 (or listed above)

Line 13: Expenditures \$50 and under\* (not listed above)

**Line 14: TOTAL EXPENDITURES IN THE PERIOD**

\* 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.

[illegible]

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>k</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.

## 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 → <b>Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)</b>				



Minuteman Press  
386 Summer Street  
Fitchburg, MA 01420  
Phone: 978-345-0818 / Fax: 978-345-0647  
E-mail: print@mmpressfitchburg.com  
Web: www.mmpressfitchburg.com

## Invoice

Invoice Number 88584  
Invoice Date 12/16/2020

Bill to: Name: Joe Shank  
Phone: 978-345-0818

Ship to:

Name:

Harbor Auto

Phone: 978-345-0818

**FREE PICK UP AND DELIVERY!**

visit our website:

[www.mmpressfitchburg.com](http://www.mmpressfitchburg.com)

100 yard signs - no stakes (Job 121200)

\$687.00

Sub Total

\$687.00

Tax

\$42.94

Invoice Total

\$729.94

**Balance Due**

**\$729.94**

Salesperson: Walk-In

PLEASE PAY FROM THIS INVOICE. NO STATEMENT WILL BE SENT.

Thank you,  
Minuteman Press:

Signature: \_\_\_\_\_





## Municipal Form

RECEIVED  
DEC 18 2020  
TOWN OF TOWNSEND  
TOWN CLERK

Please print or type all information, except signatures.

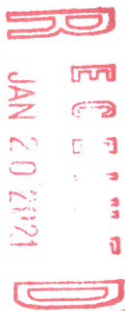
Townsend

(MM/DD/YYYY)

☒ 20th day of January (Year-End report)

2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]



Form CPF M 102-0: Campaign Finance Report  
Municipal Form  
Office of Campaign and Political Finance

Please print or type all information, except signatures.

Town of: Lowell

1000 SEND

Beginning:	Ending:

(MM/DD/YYYY)

(MM/DD/YYYY)

f Report: (Check One)

☐ 8th day preceding election

☐ 30th day following election (town or special)

☐ 20th day of January (Year-End report)

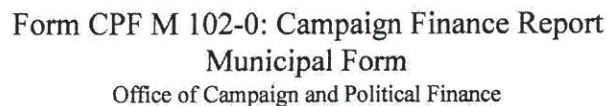
at to M.G.L. Chapter 55:

I certify that I am a candidate for or currently hold Municipal Office.

I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence. I certify that I do not have a political committee.

[illegible]





TOWN OF TOWNSEND  
TOWN CLERK

Please print or type all information, except signatures.

Type of Report: (Check One)

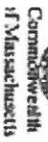
☐ 8th day preceding preliminary/primary    ☐ 8th day preceding election    ☐ 30th day following election (town or special)    ☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

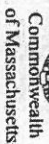
[illegible]





\_\_\_\_\_





Form CPF M 102-0: Campaign Finance Report  
Municipal Form  
Office of Campaign and Political Finance

Please print or type all information, except signatures.

City or Town of: TownsendReporting Period: Beginning: 01/01/20

(MM/DD/YYYY)

Ending: 12/31/20

(MM/DD/YYYY)

Type of Report: (Check One)

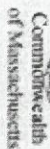
☐ 8th day preceding preliminary/primary☐ 8th day preceding election☐ 30th day following election (town or special)☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]





City or Town of:

Townsend

Please print or type all information, except signature.

Reporting Period:

### Beginning:

01/21/2020

## Ending:

12/31/2020

01/20/2021

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary☐ 8th day preceding election☐ 30th day following election (town or special)☒ 20th day of January (Year-End report)

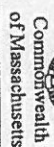
Pursuant to M.G.L. Chapter 55:

I, I certify that I am a candidate for or currently hold Municipal Office

2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]





Form CPF M 102-0: Campaign Finance Report  
Municipal Form  
Office of Campaign and Political Finance

Please print or type all information, except signatures.

City or Town of: Townsend

Reporting Period: Beginning: 01/01/2020

(MM/DD.YYYY)

Ending: 12/31/2020

(MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary☐ 8th day preceding election☐ 30th day following election (town or special)☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]







Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Town of Townsend

Fill in Reporting Period dates: Beginning Date: 1/1/2020 Ending Date: 12/31/20

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Peter F Buxton  
Candidate Full Name (if applicable)

TRUSTEE  
Office Sought and District

46 New Fitchburg Rd  
Residential Address

E-mail: STRYKER@NET1PLUS.COM

Phone # (optional):

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

0

Line 4: Total expenditures this period (page 5, line 14)

0

Line 5: Ending Balance (line 3 minus line 4)

0

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used:

N/A

RECEIVED  
JAN 19 2021  
TOWN OF TOWNSEND  
TOWN CLERK

### Affidavit of Committee Treasurer:

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, including all 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 M.G.L. c. 55.

Signed under the penalties of perjury: (Treasurer's signature) Date:

### FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

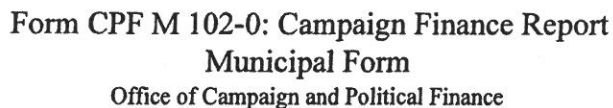
#### Candidate with Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my 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. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

#### Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: (Candidate's signature) Date: 1/1/2021



Townsend

**Beginning:**

May 27 2020  
(MM/DD/YYYY)

**Ending:**

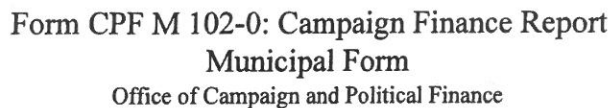
December 31, 2020  
(MM/DD/YYYY)

☐ 8th day preceding preliminary/primary☐ 8th day preceding election☐ 30th day following election (town or special)☐ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
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[illegible]



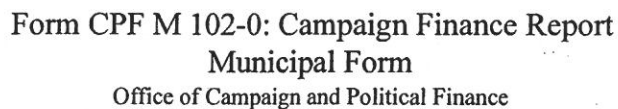
City or Town of:

Type of Report: (Check One)

Pursuant to M.G.L. Chapter 55:

- [illegible]





*Please print or type all information, except signatures.*

Type of Report: (Check One)

Pursuant to M.G.L. Chapter 55:

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[illegible]