



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: _____ Ending Date: 04 05 19

Type of Report: (Check one)

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

Jason Ross
Candidate Full Name (if applicable)

Moderator, West Bridgewater
Office Sought and District

Residential Address

E-mail: _____

Phone # (optional): _____

Committee to Elect Jason Ross
Committee Name

Paula Bunker
Name of Committee Treasurer

Committee Mailing Address

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0.00
Line 2: Total receipts this period (page 3, line 11)	1,465.00
Line 3: Subtotal (line 1 plus line 2)	1,465.00
Line 4: Total expenditures this period (page 5, line 14)	0.00
Line 5: Ending Balance (line 3 minus line 4)	0.00
Line 6: Total in-kind contributions this period (page 6)	0.00
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	Rockland Trust

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: 04/08/19

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: _____ (Candidate's signature) Date: _____

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)
03/21/19	Bennett, Jennifer 33 Arlington Rd Plymouth MA	25.00	
03/21/19	Bezanson, Brian 74 Rock Street	25.00	
03/21/19	Bryant, Donald 158 Mountain Ave Pembroke	25.00	
03/21/19	BSU Police Assoc 200 Great Hill Dr Bridgewater	100.00	
03/21/19	Costa, Susan 95 Breenbriar Lane Bridgewater	50.00	
03/21/19	Cruz, John 123 N. Elm St West Bridgewater	40.00	
03/21/19	Davock, Mark 197 W. Center Street West Bridgewater	25.00	
03/21/19	Dimarzio, Kevin 29 Orange St Abington	30.00	
03/21/19	Eaton, Greg 5 Old High Street Whitman	25	
03/21/19	Galligan, Patrick 245 South St West Bridgewater	25.00	
03/21/19	Hanson, Dawn 4 Arborview Terr W. Bridgewater	25.00	
03/21/19	Humphries, Pamela 99 Bryant St W. Bridgewater	25.00	
Line 9: Total Receipts over \$50 (or listed above)		100.00	
Line 10: Total Receipts \$50 and under* (not listed above)		320.00	
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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
03/21/19	Huphries, Patrick 11 Williams St Bedford MA	40.00	
03/21/19	Hunt, Leonard 38 Charles St W. Bridgewater	50.00	
03/21/19	Kinahan, Anthony 35 Charles St W. Bridgewater	25.00	
03/21/19	Lemiux, Laurant 1017 Bowles St New Bedford	50.00	
03/21/19	Lyons, Bernadette 12 Highvale Lane Andover	100.00	
03/21/19	May, Linda 321 Crescent St W. Bridgewater	100.00	
03/21/19	McCloud, Mark 1 Taylor Way W. Bridgewater	100.00	
03/21/19	Moriera, Eldon 30 Grant St W. Bridgewater	25.00	
03/21/19	O'Brien, Anthony PO Box 67 Whitman	50.00	
03/21/19	Reddington, Phyllis 3 Elizabeth Lane W. Bridgewater	25.00	
03/21/19	Reyes, Denise 48 Columbus Ave W. Bridgewater	50.00	
03/21/19	Roberts, Allen 3 Southgate Ave W. Bridgewater	50.00	
03/21/19	Ross, James 163 Forest St W. Bridgewater	100.00	
Line 9: Total Receipts over \$50 (or listed above)		400	
Line 10: Total Receipts \$50 and under* (not listed above)		365	
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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
03/21/19	Ross, Robert 163 Forest St W. Bridgewater	50.00	
03/21/19	Snell, Mary West Bridgewater	25.00	
03/21/19	Snell, Ronald 88 N. Main St W. Bridgewater	30.00	
03/21/19	Spadea, Eleanor 30 Wyoming Ave Brockton	50.00	
03/21/19	Spadea, Janice 44 Arlington Rd Plymouth	50.00	
03/21/19	Spadea, Robert 44 Arlington Rd Plymouth	50.00	
03/21/19	Williams, Kathleen 159 South St W. Bridgewater	25.00	

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.

