

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Museachusetts	File with: City or Town Clerk or Election Commission			
Fill in Reporting Period dates: Beginning Date: ////	2021 Ending Date: 10 15 2021			
Type of Report: (Check one) Bth day preceding preliminary Bth day preceding election	30 day after election year-end report dissolution			
it-matt:	Shaun Toohy Committee Committee Name Tatum Ryan - Toohy Name of Committee Treasurer Committee Mailing Address Shaun Toohy Name of Committee Mailing Address			
SUMMARY BALANCE				
Line 1: Ending Balance from previous report	3.01			
Line 2: Total receipts this period (page 3, line 11)	5311.94			
Line 3: Subtotal (line 1 plus line 2)	5314.95			
Line 4: Total expenditures this period (page 5, line 1	14) 1269.12			
Line 5: Ending Balance (line 3 minus line 4)	4045.83			
Line 6: Total in-kind contributions this period (page	6)			
Line 7: Total (all) outstanding liabilities (page 7)	: 61579.61			
Line 8: Name of bank(s) used:	Bank			
Affidavit of Committee Treasurer: If certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind confinance activity of all persons acting under the authority or on behalf of this committee in activity of under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	cordance with the requirements of M.G.L. c. 55. Let (Treasurer's signature) Date: 10-19-2/			
Candidate with Committee Candidate with Committee Contify 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 activity, of all persons activity, of all persons activity 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 interest of this reporting period and represents the finance activity, including contributions, loans, receipts, expenditures dishustements, in kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the sufficient of this candidate in accordance with the requirements of MOL. c. 55. Date: 1/1/17/17				
Signed under the penalties of perjury:	(Candidate's signature)			

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)
8/17/2021	MAURELA KYAN 16 Conford 5t. HAVEININ, MA. 01830	1000	Retiled
8/17/2021	William Ryanst. 16 Concord st. 14a-whid. Ma. 01830	1000-	OWNER REAL ESTATE Ryan Real Estate
10/1/2021	LOUIS FOSCATETTI 55 Merlimaest Units Newbury port Ma. 214	100.	
10/14/2021	J. Bind Fields Drive 21 Bindfields Drive Havelhill Ma. 01830	200.00	Self Employed BLOOKS Realty
10/14/2021	Ethan Conley 43 Forcest St. Plaiston NH 03665	100	
10/14/2021	Adria Dulkin 342 North End Blud Salisbury Ma 0195	250	unittier Rehabilation
10/14/2021	Dorothy Early 3 Holly Lage Bradford Ma 01835	200	Retired
10/14/2021	Joseph T. Giampa 275 Na End Blud + 27 Salis buiy Ma D1952	100	
10/14/2021	Dan Hickeymuc 133 Have hill Ma. 01834	100	Calputer/ General Contractor
10/14/2021	Kevin Waddington 61 Fountain St.	250.00	Eketlician
10/4H/2V21	Nalson Bling 154 Hoyt Road Fladford, Ma. 01835	100	
10/14/2021	Dr. Samuel Amaris. 89-93 Kenoza Ave. Harethill. Ma. 01830	250	Chiropractic / Physician Self Employed
Line 9: Total Receip	ots over \$50 (or listed above)	:]	·
Line 10: Total Recei	pts \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD receipts of \$50 and under include them in line		← 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)
6/3/2021	Show Tooky 696 Ciystalst. Haverhill, Ma. 01832	11.94	Candidate-hoan
7/28/2021	Slaun Tookey 696 Ciystal st. Itavenhill Ma.O.KB2	50	Candidate-hoan
Line 9: Total Receip	ots over \$50 (or listed above)	3650-	
	pts \$50 and under* (not listed above)		
	ECEIPTS 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.)

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
49/2021	TD BANK	Main Street Havehill, Ma.01830	Fee	7.96
5/11/21	TD Bank	Main street Harrhill Ma. 01830	Fue	6.99
6/11/21	TD Bank	Main Street Have hill. Ma. 01830	Fus	6.99
7/12/21	TD Bank	Main Street Havuhill. Mr. 0 1830	Fus	6.99
8/11/21	TD Bank	Main Street Harrifill, Mr. 0:1930	Fies	6.49
9/10/21	TD Bank	Main Street Haruhill, Ma. 01830	Fees	6.99
10/11/21	TD Bank	Main street Harchill, M. 01880	Fue	6.99
8/20/21	High Sail Stratergy	60 Functiff Not Secnot, Ma. 02771	Signs	1219.22
Line 12: Total Expenditures over \$50 (or listed above)			1219.22	
Line 13: Total Expenditures \$50 and under* (not listed above)			49.90	
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD /269. If you have itemized expenditures of \$50 and under include them in line 12. Line 13 should include only those are after the line in line 13. Line 13 should include only those are after the line in line 13. Line 13 should include only those are after the line in line 13. Line 13 should include only those are after the line in line 13. Line 14 should include only those are after the line in line 13. Line 14 should include only those are after the line in line 14.				1269.12

^{*} 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 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
				`
 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 $6 \rightarrow$	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	

^{*} 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
6/3 poss	Shaun Toohiy	696 Ciystalst. It averbill far of	Cardidate 82 Loan	11.94
7/28/201	Shaun Tookey	196 Ciystalst Haruhil, Mareis	Landiante Loan	50.00
12/31/2020	Shaun Tookey	HANNIL MINES	Candidate	61517.67
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	·			
		·		
	:	·		
	·		·	
	Enter on page 1, line $7 \rightarrow$	Line 18: TOTAL OUTSTAND	ING LIABILITIES (ALL)	61579.41