



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

RECEIVED
TOWNSHIP OF PLYMOUTH
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 3/26/21 Ending Date: 5/15/21

Type of Report: (Check one)

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

Katherine Jackson	
Candidate Full Name (if applicable)	
School Committee	
Office Sought and District	
22 Nixon Ave. Plymouth MA 02360	
Residential Address	
E-mail:	katphotogirl@gmail.com
Phone # (optional):	Chas508-272-8560

School Committee	
Committee Name	
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)

441.25

Line 3: Subtotal (line 1 plus line 2)

441.25

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

441.25

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: Chase Visa

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:

Katherine Jackson

(Candidate's signature)

Date: 5/11/21

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.)

Enter on page 1, line

* 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 A: RECEIPTS (continued)

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 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.)

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

441.25

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

6

Line 11: TOTAL RECEIPTS IN THE PERIOD

441.2

← 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 (continued)

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD

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

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

* 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.

Enter on page 1, line 6 →

Line 17: TOTAL IN-KIND CONTRIBUTIONS

* 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. Page 6

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.

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

Kingston Signarama
62 Main St
Kingston MA 02364
Tel: 781-585-1355

Date: 2021-03-25 12:29:07

Card Num : XXXXXXXXXXXXXXXX0798

Card Type : visa

Type : sale

Transaction ID : 5579746

Reference # : 2762249431

Auth Code : 07190D

Invoice : INV-4342

Customer ID : 10429

Name : Jackson, Kathenne

Description : Onetime Sale

custom1 :

custom2 : fb9a763f-2351-45d4-a9d4-f3a1d3ad0f48

custom3 : INV-4342

AMOUNT : \$250.00

TAX : \$0.00

TOTAL : \$250.00

I AGREE TO PAY ABOVE TOTAL AMOUNT
ACCORDING TO CARD ISSUER AGREEMENT



62 Main Street
Kingston, MA 02364
(781) 585-1355

INVOICE

INV-4504

<https://www.signarama.com/ma-kingston/>

Completed Date: 4/19/2021

Payment Terms: Cash Customer

Payment Due Date: 4/19/2021

Created Date: 4/15/2021

DESCRIPTION: Yard Signs

Bill To: Jackson, Katherine
22 nixon ave
Plymouth, MA 02360
US

Pickup At: Signarama Kingston MA
62 Main Street
Kingston, MA 02364
US

Ordered By: kathenne Jackson
Email: Katphotogirl@gmail.com

Salesperson: Harry Titus
Entered By: Susan Fitzgerald

NO.	Product Summary	QTY	UNIT PRICE	TAXABLE	AMOUNT
1	Yard Signs	20	\$9.00	\$180.00	\$180.00
1.1	Coroplast White 4mm-Flatbed - Text: 4mm coro flatbed printed Yellow & Black Double sided with Step Stake Kathen'ne Jackson for School Committee				

Subtotal:	\$180.00
Taxable Amount:	\$180.00
Taxes:	\$11.25
Grand Total:	\$191.25
Amount Paid:	\$0.00
BALANCE DUE:	\$191.25

Signature: _____

Date: _____