



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: April 7, 2023 Ending Date: May 12, 2023

## Type of Report: (Check one)

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

Candidate Full Name (if applicable)
Office Sought and District
Residential Address
E-mail:
Phone # (optional):

CHARTER YES COMMITTEE
Committee Name
LOVE ALBRECHT HOWARD
Name of Committee Treasurer
735 LONG POND ROAD, PLYMOUTH, MA 02360
Committee Mailing Address
E-mail: <u>alovea@comcast.net</u>
Phone # (optional): <u>781.424.7176</u>

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	3580.00
Line 3: Subtotal (line 1 plus line 2)	3580.00
Line 4: Total expenditures this period (page 5, line 14)	1969.80
Line 5: Ending Balance (line 3 minus line 4)	2230.80
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:	Rockland Trust <a href="http://www.rocklandtrust.com">www.rocklandtrust.com</a>

## 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:

[Signature] (Treasurer's signature)

Date: May 12, 2023

## 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: \_\_\_\_\_

## 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)
04-08-2023	William Keohane 19 Fremont Street Plymouth, MA 02360	50.00	Realtor Keller Williams Realty Plymouth, MA
04-08-2023	Love Albrecht Howard 735 Long Pond Road Plymouth, MA 02360	250.00	SelfEmployed AH LOVE design/build Plymouth, MA 02360
04-10-2023	William Abbott 33 Herring Way Plymouth, MA 02360	750.00	Attorney in Private Practice 33 Broad Street Boston, MA 02109
04-11-2023	Charlotte E. Russell 725 Long Pond Road Plymouth, MA 02360	300.00	Retired
04-11-2023	Donald Williams 42 Carter's Bridge Road Plymouth, MA 02360	100.00	Retired Professor
04-11-2023	Birgitta Keuhn 18 Edgewater Drive Plymouth, MA 02360	150.00	
04-11-2023	Vicki Sibley 256 Court Street Plymouth, MA 02360	50.00	
04-11-2023	David B. Peck 16 Overlook Road Plymouth, MA 02360	100.00	
04-11-2023	Patricia Adelman 34 Stockade Path Plymouth, MA 02360	100.00	
04-15-2023	Richard Serkey 60 Allerton Street Plymouth, MA 02360	100.00	Retired Attorney
04-28-2023	William Keohane 19 Fremont Street Plymouth, MA 02360	100.00	Realtor Keller Williams Realty Plymouth, MA
04-28-2023	Charlotte E. Russell 725 Long Pond Road Plymouth, MA 02360	400.00	Retired
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		CONT. on P. 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 A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
04-28-2023	Geraldine Williams 42 Carter's Bridge Road Plymouth, MA 02360	100.00	Retired
04-28-2023	John Adelman 34 Stockade Path Plymouth, MA 02360	100.00	
04-28-2023	William Abbott 33 Herring Way Plymouth, MA 02360	250.00	Attorney in Private Practice 33 Broad Street Boston, MA 02109
04-30-2023	Sarah Sibley 256 Court Street Plymouth, MA 02360	200.00	
04-30-2023	Christine K. Pratt 242 Court Street Plymouth, MA 02360	100.00	
04-30-2023	Donna Eddy 5 Willard Place Plymouth, MA 02360	25.00	
05-02-2023	Richard Serkey 60 Allerton Street Plymouth, MA 02360	200.00	Retired Attorney
05-02-2023	Peter Neville 296 Billington Street Plymouth, MA 02360	100.00	
05-08-2023	Andrea Dickenson 22 Ellisville Drive Plymouth, MA 02360	50.00	
05-08-2023	William Harting 8 Fremont Street Plymouth, MA 02360	100.00	
05-08-2023	Bruce R. Howard 735 Long Pond Road Plymouth, MA 02360	150.00	
05-10-2023	Denise Vaughn Stowell 3 Hog Rock Road Plymouth, MA 02360	100.00	IT Consultant EMMSPIRE Winston-Salem, NC
05-10-2023	Lois Paul 36 Woody Nook Plymouth, MA 02360	100.00	Retired
Line 9: Total Receipts over \$50 (or listed above)		3555.00	
Line 10: Total Receipts \$50 and under* (not listed above)		25.00	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		<b>3580.00</b>	← 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]

\* 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]

\* 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
			Line 15: In-Kind Contributions over \$50 (or listed above)	0
			Line 16: In-Kind Contributions \$50 & under (not listed above)	
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	0

\* 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>	NONE