



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 4/11/25 Ending Date: 6/16/25 File with: City or Town Clerk or Election Commission

Type of Report: (Check one)

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

Thomas A. Jacintho

Candidate Full Name (if applicable)

Planning Board

Office Sought and District

78 tree top way

Residential Address

E-mail:

Phone #:

Committee To Elect Tom Jacintho

Committee Name

Timothy Lawlor

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone #:

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

2531.00

Line 2: Total receipts this period (page 3, line 12)

820.00

Line 3: Subtotal (line 1 plus line 2)

3351.00

Line 4: Total expenditures this period (page 5, line 15)

1551.00

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

0

Line 6: Total in-kind contributions this period (page 6, line 18)

TONY JACINTHO
TREASURER

Line 7: Total (all) outstanding liabilities (page 7, line 19)

8
3
5
E

Line 8: Total out-of-pocket expenses this period (page 8, line 22)

1800.00

Line 9: 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: 6/13/25

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: 6/13/25

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities. *Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.*

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5/29	Proffesional Firefighters of Mass	500.00	
5/29	Steve Keith plymouth Ma	300.00	
5/29	Tim Lawlor 60 rockyhill rd ply ma	20.00	

Enter receipt totals on Page 3

SCHEDULE B: EXPENDITURES (continued)

* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.

Line 13: Expenditures over \$50 (or listed above)

Line 14: Expenditures \$50 and under (not listed above)

Enter on page 1, line 4 → **Line 15: TOTAL EXPENDITURES IN THE PERIOD**

SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

OUT-OF-POCKET EXPENSES
Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. *Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.*

Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50
(or listed above)

Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and under (not listed above)

Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THIS PERIOD

* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.

← Enter on page 1, line 8