

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

NORTHBOROUGH TOWN CLERK RCUD 2021 MAY 4 PM12:06

Fill in Reporting Period dates: Beginning Date: 3/	/25/21 Ending Date: 5/3/21
	725/21 Ending Date: 5/3/21
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	1 30 day after election year-end report dissolution
Karen Ares	Regional School Committee
Candidate Full Name (if applicable)	Committee Name
NSBORO Regional School Committee Office Sought and District	
31 Leland Drive, Northborough, MA 01532	Name of Committee Treasurer
Residential Address	Committee Mailing Address
I-mail kares1990@gmail.com	E-mail:
Phone # (optional).	Phone # (optional):
CUMMEANUM	
SUMMARY BALAN	NCE INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3. line 1	11) 132.81
Line 3: Subtotal (line 1 plus line 2)	132.81
Line 4: Total expenditures this period (page 5, 1	line 14)
Line 5: Ending Balance (line 3 minus line 4)	- 132.81
Line 6: Total in-kind contributions this period (page 6)
Line 7: Total (all) outstanding liabilities (page 7	7)
Line 8: Name of bank(s) used:	
finance activity of all persons acting under the authority or on behalf of this committee Signed under the penalties of perjury:	(Treasurer's signature) (Treasurer's signature)
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 11	
Candidate with Committee I certify that I have examined this report including attached scheduler and a control of the control	the best of my knowledge and belief, a true and complete statement of all campaign finance
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority open behalf of the contributions.	the best of my knowledge and belief, a true and complete statement of all campaign ints, in-kind contributions and liabilities for this reporting period and represents the this candidate in accordance with the requirements of M.G.L. c. 55.
signed under the penaltics of perjury: are lust	(Candidate's signature) Date: 5-3-2/

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	
	(passental listing required)	Amount	(for contributions of \$200 or more)	
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And the second s				
		The second secon		
9: Total Receipts	over \$50 (or listed above)			
10: Total Receipt:	\$ \$50 and under* (not listed above)			
	CEIPTS IN THE PERIOD			

^{*} 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) Amo		Occupation & Employer (for contributions of \$200 or more)
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	7		
ne 9: Total Receipts ove	er \$50 (or listed above)		
	0 and under* (not listed above)		
ne 11: TOTAL RECEI	PTS IN THE PERIOD		
		•	Enter on page 1, line 2 include only those receipts not itemized above

^{*} 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 a

Date Paid	To Whom Paid (alphabetical listing)	Address		
	Practical Image		Purpose of Expenditure	Amount
3/29/21		763 Waverly St., Framingham, MA 01702	campaign lawn signs	132.
	8			
			7	
		100 Maria 100 Ma		
	Ği.			
	25.	Line 12: Total Expenditures ove	r \$50 (or listed above)	132.81
	2	Line 13: Total Expenditures \$50		
	Enter on page 1. line 4 →			
	zed expenditures of \$50 and under	Line 14: TOTAL EXPENDITU	KES IN THE PERIOD	132.81

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized

SCHEDULE B: EXPENDITURES (continued)

D. A. D. LL	To Whom Paid	CLE B: EXPENDITURES (
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
and Application				
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	The state of the s			
			The state of the s	
The state of the s		70.		
		Line 12: Expenditures over \$50	(or listed above)	
Line 13: Expenditures \$50 and under* (not listed above)				
	Enter on page 1. line 1. s			
f you brave items	ad avpanditures affect and the	Line 14: TOTAL EXPENDITU	JRES IN THE PERIOD	132.81

^{*} 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.

ate Received	From Whom Received*	Residential Address	Description of Contribution	Value
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1	e v 1			
	NA 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
	a =			
	2	Line 15: In-Kind Contributions	over \$50 (or listed above)	
		Line 16: In-Kind Contributions \$		
	Enter on page 1. line 6 →	ho contributes more than \$50 in a cal	ONTRIBUTIONS	Ō

^{*} 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.

Date Incurred	To Whom Due	Address	Purpose	Amoun
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			0	
	Enter on page 1. line 7 → 1 in	ne 18: TOTAL OUTSTAND	INC HADILITIES (ALL)	