



Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

City or Town of: Freetown

Please print or type all information, except signatures.

Fill in dates:	Month	Day	Year	Month	Day	Year
Reporting Period Beginning	<u>last</u>	<u>report</u>	<u>filed</u>	Ending	<u>12</u>	<u>31</u> <u>2011</u>

Type of Report: (Check One)

8th day preceding preliminary/primary
 8th day preceding election
 30th day following election (Town or Special)
 20th day of January (Year-End Report)

Pursuant to M.G.L., Chapter 55:

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	I. SIGNATURE <small>Signed under the penalties of perjury</small>	II. RESIDENTIAL ADDRESS <small>(Street and Number)</small>	III. OFFICE SOUGHT
12/30/11	<i>Reginald Brown</i>	132 Bullack Rd	Town Clerk
01-03-12	<i>[Signature]</i>	35 - E. PUBLIC -	WATER COMM -
1/3/12	<i>[Signature]</i>	256 Chace Rd	FIN COM
1-3-12	<i>Michael T. McCue</i>	7 South Oldside St.	Secretary Commission
1-3-12	<i>Michael T. McCue</i>	7 South Oldside St	Library Trustee
1-4-12	<i>Marion Somerville</i>	102 Chace rd	Tree warden
1-4-12	<i>[Signature]</i>	5 Washington St	WATER COMM
1-4-12	<i>[Signature]</i>	68 Howland St	FINCOM
1/04/12	<i>[Signature]</i>	7 KEVIN DR.	PLANNING BOARD
1/5/2012	<i>Sue Wilbra</i>	3 HOWLAND Rd	MODERATOR
1/6/12	<i>Lucille M. Rosa</i>	9 W. Cudworth Ave	Library Trustee
1/6/12	<i>[Signature]</i>	53 DR GARY Rd	LIBRARY TRUSTEE
1/6/12	<i>[Signature]</i>	8 Matawa Dr	FinCom





Commonwealth of Massachusetts

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8th day preceding election

30th day following election (Town or Special)

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- I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/9/12	Robert W Clark	171 Bullock Rd	Local School Committee
	Robert W Clark	171 Bullock Rd	Regional School Committee
1/20/12	Charles J. Macender	21 Island Rd. ext.	Highway Surveyor
1/25/12	Sean C. Fox	11 Jeffrey Ln.	Selectman
1-25-12	[Signature]	43 WATA ST	Planning Board
1-25-12	[Signature]	43 WATA ST	WATA
1-26-12	Steve Ashley	24 Keene Rd	Library trustee





Commonwealth of Massachusetts

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- I certify that I do not have a political committee.

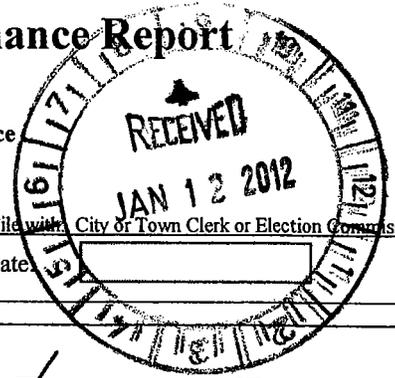
DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/3/2012		83 LOCUST ST.	ASSESSOR
1/3/2012		83 LOCUST ST.	PLANNING COM.
1/3/2012		11 TOMMYS LN	ASSESSOR
1/9/2012		6 NARROWS RD	ASSESSOR
1/13/12		71 Bullock Rd.	Finance C.
1/20/12		18 EAST PUBLIC ST	Cemetery
1/23/12		1/2 BELL ROCK RD	Setback comm





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: [] Ending Date: []

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Sandra Souza
Candidate Full Name (if applicable)
[]
Office Sought and District
34 Simpson Lane
Residential Address
Telephone Number (optional): []

Freedom-Lakeville School Committee (Key)
Committee Name
[]
Name of Committee Treasurer
[]
Committee Mailing Address
Telephone Number (optional): []

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	[]
Line 2: Total receipts this period (page 3, line 11)	[]
Line 3: Subtotal (line 1 plus line 2)	[]
Line 4: Total expenditures this period (page 5, line 14)	[]
Line 5: Ending Balance (line 3 minus line 4)	[]
Line 6: Total in-kind contributions this period (page 6)	[]
Line 7: Total (all) outstanding liabilities (page 7)	[]
Line 8: Name of bank(s) used:	[]

NA

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 and no activity independent of the 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.

Candidate without Committee OR Candidate with independent activity filing separate report
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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Sandra Souza (Candidate's signature) Date: 1-7-12

No previous campaign balance or any other financial monetary contribution or balances



Commonwealth of Massachusetts

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File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/11 Ending Date: 12/31/11

Type of Report: (Check one)
 8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

MARC TISDELL
Candidate Full Name (if applicable)

PLANNING BOARD
Office Sought and District

137 COUNTY RD, F. FRANKLIN
Residential Address

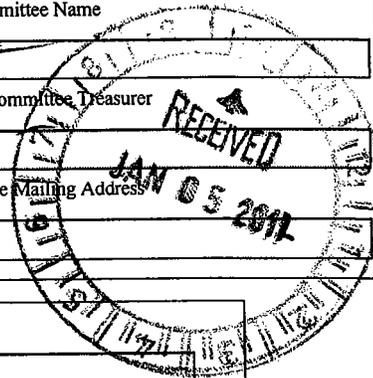
Telephone Number (optional): 508-963-4098

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):



SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>- 0 -</u>
Line 2: Total receipts this period (page 3, line 11)	<u>- 0 -</u>
Line 3: Subtotal (line 1 plus line 2)	<u>- 0 -</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>- 0 -</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>- 0 -</u>
Line 6: Total in-kind contributions this period (page 6)	<u>N/A</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>N/A</u>
Line 8: Name of bank(s) used:	<u>N/A</u>

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: 1/4/12

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the 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.

Candidate without Committee OR Candidate with independent activity filing separate report
 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 1/4/12



Commonwealth of Massachusetts

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Fill in Reporting Period dates: Beginning Date: Ending Date:

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Adrienne hevesoue
Candidate Full Name (if applicable)
Cemetery Committee
Office Sought and District
213 So. Main St. Assonet, MA
Residential Address
Telephone Number (optional): 508-644-3035

Committee Name:
Name of Committee Treasurer:
Committee Mailing Address:
Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<input type="text"/>	0
Line 2: Total receipts this period (page 3, line 11)	<input type="text"/>	0
Line 3: Subtotal (line 1 plus line 2)	<input type="text"/>	0
Line 4: Total expenditures this period (page 5, line 14)	<input type="text"/>	0
Line 5: Ending Balance (line 3 minus line 4)	<input type="text"/>	0
Line 6: Total in-kind contributions this period (page 6)	<input type="text"/>	0
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text"/>	0
Line 8: Name of bank(s) used:	<input type="text"/>	

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: Adrienne Hevesoue (Treasurer's signature) Date:

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the 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.

Candidate without Committee OR Candidate with independent activity filing separate report
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Signed under the penalties of perjury: Adrienne Hevesoue (Candidate's signature) Date: 1-8-2012



Commonwealth of Massachusetts

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Type of Report: (Check one)
 8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

Hakker Sarva
Candidate Full Name (if applicable)

Office Sought and District

Pierce Way Freeborn
Residential Address MA

Telephone Number (optional): -

Finance Committee
Committee Name

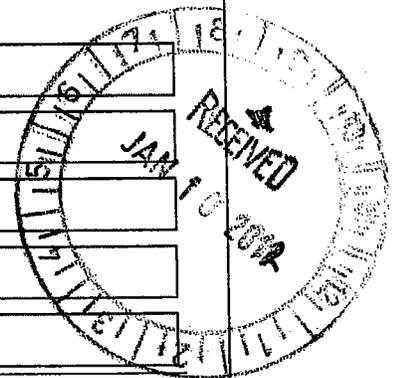
Name of Committee Treasurer

Bill Lombardi
Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>0</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	



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Signed under the penalties of perjury: _____ (Treasurer's signature) Date: _____

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Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 1/4/12