

Form CPF M 102: Campaign Finance Report IVIUNICIPAL FORM RECEIVED Office of Campaign and Political FinanEREETOWN TOWN CLERK

2021 FEB 26 AM 11: 09

Fill in Reporting Period dates: Beginning Date:	Ending Date: 13/31/2020
Type of Report: (Check one)	30 day after election year-end report dissolution
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Keven Vincent Desmarais Candidate Full Name (if applicable)	Committee to Re-Elect Keven Desmarci
Planning Board Diffice Sought and District	Comeron Desmarcis Name of Committee Treasurer
18 East Public St Assonet Residential Address	18 Fast Public St Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALANCE	INFORMATION:
Line 1: Ending Balance from previous report	90,35
Line 2: Total receipts this period (page 3, line 11)	0.00
Line 3: Subtotal (line 1 plus line 2)	90.35
Line 4: Total expenditures this period (page 5, line	14) 25.53
Line 5: Ending Balance (line 3 minus line 4)	64.82
Line 6: Total in-kind contributions this period (pag	e 6) 0.00
Line 7: Total (all) outstanding liabilities (page 7)	0.00
Line 8: Name of bank(s) used: Rockland	d Trust
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best o activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind co finance activity of all persons acting under the authority or on behalf of this committee in activity.	ntributions and liabilities for this reporting period and represents the campaign econdance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Treasurer's signature) Date: 2/22/21
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	only)
Candidate with Committee and no activity independent of the committee 1 certify that I have examined this report including attached schedules and it is, to the be activity, of all persons acting under the authority or on behalf of this committee in accommittee any liabilities nor made any expenditures on my behalf during this reporting p	ordance with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee OR Candidate with independent activity filing september 1 certify that I have examined this report including attached schedules and it is, to the befinance activity, including contributions, loans, receipts, expenditures, disbursements, is campaign finance activity of all persons acting under the authority at on behalf of this	nest of my knowledge and belief, a true and complete statement of all campaign in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date: 2/25/21

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)
J			
	ots over \$50 (or listed above)		
ne 10: Total Recei	pts \$50 and under* (not listed above)		
ne 11: TOTAL R	ECEIPTS 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 (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
7-11			
	,)		
Line 9: Total Rece	ipts over \$50 (or listed above)		
	sipts \$50 and under* (not listed above)		
Line 11: TOTAL I	RECEIPTS IN THE PERIOD	as O. Ling 10 shou	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

	To Whom Paid		A 4	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
111				
[]]				
			L	
111				
. NI				
111				
				F
111				
	9			
		Line 12: Total Expenditures ov	er \$50 (or listed above)	
		Line 12: Total Expenditures ov	er \$50 (or fisted above)	·
		Line 13: Total Expenditures \$50	and under* (not listed above)	25.5
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	unee in the Dedion	25.5

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

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
				i
				11
	7117			
		Line 12: Expenditures over \$5	0 (or listed above)	
		Line 13: Expenditures \$50 and		
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDI	FURES IN THE PERIOD should include only those expendit	

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

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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)		
		Line 16: In-Kind Contributions \$50 & under (not listed above)			
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND Co	ONTRIBUTIONS		

^{*} 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.

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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
	1			
			**	
	T. 11 7 .	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	

				16	
		.5			
	**				