

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2022 JAN 15 AM 11: 16

File with: City or Town Clerk or Election Commission
nuary 1, 2021 Ending Date: December 31, 2021
30 day after election year-end report dissolution
SANDRA J. (RISTO COMMIT) Committee Name PARIENE VARA LARDE Name of Committee Treasurer CRISTO LANE Committee Mailing Address E-mail: Phone # (optional):
CE INFORMATION:
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to f my knowledge and belief, a true and complete statement of all campaign finance contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: //// (Treasurer's signature) Date: /// Exampaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period that are not otherwise disclosed in this report. Description: Date: /// Date: /// Date: /// Date: // 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)
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ine 9: Total Recei	ipts over \$50 (or listed above)	0	
ine 10: Total Rece	eipts \$50 and under* (not listed above)	0	
ing 11. TOTAL I	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	

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ne 9: Total Receipts	s over \$50 (or listed above)	0	AND AND THE CONTRACTOR AND	
ne 10: Total Receipt	s \$50 and under* (not listed above)	0		
ie 11: TOTAL RE	CEIPTS IN THE PERIOD	0	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.)

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Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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		Line 12: Total Expenditures ov	ver \$50 (or listed above)	8
		January Salvery Salver	44.	
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	
	Enter on man 1 line 4 -	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	<u> </u>

^{*} 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	Pumpaga of E.	
		Address	Purpose of Expenditur	e Amount
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		Line 12: Expenditures ov	er \$50 (or listed above)	0
7			and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPE	NDITURES IN THE PERIOD e 13 should include only those expenditure	

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

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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
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	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANDIN	G LIABILITIES (ALL)	0