

Form CPF M 102: Campaign Finance Report CEIVED Municipal Form

Office of Campaign and Political Finance

2021 MAY 10 AM 11:53

of Massachusetts	File with: City or Town Clerk or Election Commission			
Fill in Reporting Period dates: Beginning Date: Mar 2	24, 2021 Ending Date: May 1, 2021			
Type of Report: (Check one)				
8th day preceding preliminary 8th day preceding election	⊠ 30 day after election			
Dawn Seivers	Dawn Seivers for Dedham School Committee			
Candidate Full Name (if applicable)	Committee Name			
Dedham School Committee	Ryan C. Seivers			
Office Sought and District	Name of Committee Treasurer			
1000 Presidents Way, Apt 1405, Dedham MA 02026	1000 Presidents Way, Apt 1405, Dedham MA 02026			
Residential Address	Committee Mailing Address			
E-mail: dawnseivers@gmail.com	E-mail: dawnfordsc@gmail.com			
Phone # (optional): (617) 877-2596	Phone # (optional): (443) 599-2016			
SUMMARY BALANC	CE INFORMATION:			
Line 1: Ending Balance from previous report	799.45			
Line 2: Total receipts this period (page 3, line 11)	175			
Line 3: Subtotal (line 1 plus line 2)	974.45			
Line 4: Total expenditures this period (page 5, lin	ne 14) 667.44			
Line 5: Ending Balance (line 3 minus line 4)	307.01			
Line 6: Total in-kind contributions this period (pa	age 6)			
Line 7: Total (all) outstanding liabilities (page 7)	1,500			
Line 8: Name of bank(s) used: Citizens Bank				
Affidavit of Committee Treasurer: It 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: 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) (Candidate's signature) (Candidate's signature)			

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.)

Name and Residential Address			Occupation & Employer
Date Received	(alphabetical listing required) Amount		(for contributions of \$200 or more)
4/5/2021	Sarah Smegal 150 Monroe St, Dedham MA 02026	100	
Line 9: Total Rece	ipts over \$50 (or listed above)		
	eipts \$50 and under* (not listed above)		
ine 11: TOTAL	RECEIPTS 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)

Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)
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Line 9: Total Recei	pts over \$50 (or listed above)	100	
Line 10: Total Rece	ipts \$50 and under* (not listed above)	75	
Line 11: TOTAL I	RECEIPTS IN THE PERIOD	175	← 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
Date Faid	(aiphabeticai listing)	Audicss	r ur pose or expenditure	Amount	
3/26	Vista Print	274 Wyman St, Waltham MA 02451	3,000 5" x 7" Postcards; car magnets	310.55	
4/5	The Dedham Times	395 Washington St, Dedham MA 02026	Cost to insert 2,500 postcards into 4/9/2021 edition of TDT	295	
4/13	Vista Print	274 Wyman St, Waltham MA 02451	Thank you cards	61.89	
Line 12: Total Expenditures over \$50 (or listed above)					
Line 13: Total Expenditures \$50 and under* (not listed above)					
	Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				

^{*} 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)

To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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		CT-Lamburg.	**************************************	
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				1
		Line 12: Expenditures over \$50	(or listed above)	667,44
Line 13: Expenditures \$50 and under* (not listed above)				
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	667.44
			hauld include only those evpenditure	L

^{*} 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
	200			
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				<u></u>
THE COLUMN TO TH				Table Transport
		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 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
2/19	Dawn Seivers	1000 Presidents Way #1405 Dedham MA 02026	LOAN for Campaign	1,500
1000				
The state of the s				
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	1,500