

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission			
Fill in Reporting Period dates: Beginning Date: /-	1-2022 Ending Date: MAY 3, 9082			
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	30 day after election year-end report dissolution			
Candidate Full Name (if applicable)	Southwick Republican Town Committee Committee Name			
Office Sought and District	Robert N. Fox Name of Committee Treasurer P.O. BOX 816			
Residential Address E-mail:	E-mail: R. FOX 53 & COMMERSTINET			
Phone # (optional):	Phone # (optional): 4/3 579-4585			
SUMMARY BALANCI	E INFORMATION:			
Line 1: Ending Balance from previous report	9839,38			
Line 2: Total receipts this period (page 3, line 11)	26 20.00			
Line 3: Subtotal (line 1 plus line 2)	545938			
Line 4: Total expenditures this period (page 5, line	5333,75			
Line 5: Ending Balance (line 3 minus line 4)	12563			
Line 6: Total in-kind contributions this period (page	ge 6)			
Line 7: Total (all) outstanding liabilities (page 7)				
Line 8: Name of bank(s) used:	BerksHize			
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: TOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)				
activity, of all persons acting under the authority or on behalf of this committee in acci incurred any liabilities nor made any expenditures on my behalf during this reporting p	•			
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the befinance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	in-kind contributions and liabilities for this reporting period and represents the			
Signed under the penalties of perjury:	Date:(Candidate's signature)			

SCHEDULE A: RECEIPTS (continued)

Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)			
11-20-21	Robert Johnson#30A TANNERY Rel Swick	500.00	Retried			
11-8-21	. 16	500:00	11 depontol 1-4-22			
11-12-21	Terry Mis H 264 GRANVILLE Rol Surck	50.00	Retirical			
11-5-27	Art Pivell 72 mortururg surch	50,00	Retired			
11-5-21	Celiste STITACQUES Check# # 185	57400				
2-4-22	CASH DONATION For SHAINERS 1405pital	5600				
4-4-22	Lich Buldaga / Stevett Surthunck # 1515	50.00	STAte Rep.			
11 11	Vinginia and David 224 Laugitill Wisprinfred Perll	50,00				
115000	Doug Maglin 4149 5 Hidden place	10000	whalley Computer			
4-4-22	Aggregate ticket sales Dasta Dinner	1100.00	multiple sales//easH			
4-4-92	Ticket protections	25,00				
4-11-22	Edvonnson 6 Cargan Ferral sunk	35,00	Retired			
4-11-22 Donations aggregate		60,00				
Line 9: Total Receipts over \$50 (or listed above)						
Line 10: Total Rece	ipts \$50 and under* (not listed above)					
	Line 11: TOTAL RECEIPTS IN THE PERIOD [26, 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.					

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.)

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
2-26-23	5 Humans Hospital	springfield pra.	Robert Horocek	1450.00
4-5-22	spotLite GRAPHUS	Southwek MA.	Signs	2 33.75
4-5-92	Post Road Strategies LC	P.O.BOX 661 SUUTHURCK	P051 CANO 5	3400.00
4-13-92	TOWN OF Sorthwell	11	Police/DONAtion	250.00
		Line 12: Total Expenditures ov	er \$50 (or listed above)	
		Line 13: Total Expenditures \$50	and under* (not listed above)	
•	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	5333,75

^{*} 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 \$	550 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$	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
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According to the Control of the Cont		Line 18: TOTAL OUTSTAND		



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

JUNE 10 47 3032

MAY 44 9090 Ending Date: Fill in Reporting Period dates: Beginning Date: Type of Report: (Check one) 30 day after election 8th day preceding preliminary 8th day preceding election year-end report dissolution Southwick Republican Town Commit Hee Candidate Full Name (if applicable) Office Sought and District Residential Address FOX 82 @ COM CAST. NET E-mail: Phone # (optional): Phone # (optional): SUMMARY BALANCE INFORMATION: 195.63 Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) 125.63 Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) 195.63 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) BANK BerksHiRE Line 8: Name of bank(s) used: 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 compatitee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) 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. 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)



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

OT 1914354CHUSCKS	File with: City or Town Clerk or Election Commissio
Fill in Reporting Period dates: Beginning Date: June	R 11, 2022 Ending Date: Dec 31, 2022
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day after election vear-end report dissolution
Candidate Full Name (if applicable)	Southwick Republican Jown Committee Robert N. Fox
●ffice Sought and District	P.O. Box 816
Residential Address E-mail:	E-mail: Pfox52@comcast, net
Phone # (optional):	Phone # (optional): 413 579 4585
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	125.63
Line 2: Total receipts this period (page 3, line 11)	3568.00
Line 3: Subtotal (line 1 plus line 2)	3693.63
Line 4: Total expenditures this period (page 5, line	ne 14) - 566.00
Line 5: Ending Balance (line 3 minus line 4)	3127.63
Line 6: Total in-kind contributions this period (page	age 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: Berkshi	ire Bank
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind c finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo)	ox only)
11)	the best of my knowledge and belief, a true and complete statement of all campaign finance occordance with the requirements of M.G.L. c. 55. I have not received any convibutions, g 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 finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	is, in-kind contributions and liabilities for this reporting period and represents the ais candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	Date:(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.)

report all receipts. F	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)			
8/12/22	Aggregate Amount Break Fast Licket Sales	3130.0				
10/11/22	aggregate amount Break Fest Ticket sales	438-00				
Line 9: Total Recei	pts over \$50 (or listed above)					
Line 10: Total Rece	ipts \$50 and under* (not listed above)					
Line 11: TOTAL I	RECEIPTS IN THE PERIOD	3568,00	← 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.)

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
8/11/32		Southwick	Box Revtal	66.00
9/19/22-43	Committee to as reelect NICholas BOLdygA	135Terrett Southwek	Donation TO Committee	500.00
Line 12: Total Expenditures over \$50 (or listed above) 566.00				
		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				

^{*} 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 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	A	ddress	Purpose	Amount
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		Constitution of the Consti			And the control of th
	Enter on page 1 line 7	Line 18: TO	TAL OUTSTAND	DING LIABILITIES (ALL)	Section 1 to 1

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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.

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Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		$\Lambda \Pi A$		
a de la constanta de la consta				
		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				ean gui, guirt d'eille chroibreach saois ann an Aonach ann ann an Coirteann ann an Coirteann ann an Coirteann

^{*} 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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