



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

FAIRHAVEN TOWN CLERK
RCUD 2024 JAN 22 PM3:18

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: March 10, 2023 Ending Date: December 31, 2023

Type of Report: (Check one)

- 8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

Brendalee A. Smith
Candidate Full Name (if applicable)

School Committee
Office Sought and District

71 Fort Street, Fairhaven, MA 02719
Residential Address

E-mail: brendalee43c@gmail.com

Phone #: 401-439-1525

Committee to Elect Brendalee Smith
Committee Name

Melissa Arruda
Name of Committee Treasurer

71 Fort Street, Fairhaven, MA 02719
Committee Mailing Address

E-mail: brendalee43c@gmail.com

Phone #: 401-439-1525

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$12.91
Line 2: Total receipts this period (page 3, line 12)	\$250.00
Line 3: Subtotal (line 1 plus line 2)	\$262.91
Line 4: Total expenditures this period (page 5, line 15)	\$247.57
Line 5: Ending Balance (line 3 minus line 4)	\$15.34
Line 6: Total in-kind contributions this period (page 6, line 18)	0
Line 7: Total (all) outstanding liabilities (page 7, line 19)	0
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	0
Line 9: Name of bank(s) used:	<u>TD Bank</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: Melissa Arruda (Treasurer's signature) Date: 1-22-24

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

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: Brendalee A. Smith (Candidate's signature) Date: 1-22-24

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5-4-23	Smith, Brenda Lee	\$150.00	Director of Community Development New Life South Coast 1331 Cove Rd, New Bedford, MA 02744
9-26-23	Smith, Brenda Lee	\$100.00	Director of Community Development New Life South Coast 1331 Cove Rd, New Bedford, MA 02744
Line 10: Total Receipts over \$50 (or listed above)		\$250.00	* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.
Line 11: Total Receipts \$50 and under (not listed above)		0	
Line 12: TOTAL RECEIPTS IN THE PERIOD		\$250.00	← Enter on page 1, line 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
5-9-23	L & P Graphics, Inc	376 Peckham St. Fall River, MA 02724	stickers	\$ 111.57
5-25-23	TD Bank	754 main St. Weymouth, MA 02190	Service Charge	\$ 16.00
6-23-23	TD Bank	754 main St. Weymouth, MA 02190	Service Charge	\$ 16.00
7-25-23	TD Bank	754 main St Weymouth, MA 02190	Service Charge	\$ 16.00
8-25-23	TD Bank	754 main St Weymouth, MA 02190	Service Charge	\$ 16.00
9-25-23	TD Bank	754 main St Weymouth, MA 02190	Service Charge	\$ 18.00
10-25-23	TD Bank	754 main St Weymouth, MA 02190	Service Charge	\$ 18.00
11-24-23	TD Bank	754 main St Weymouth, MA 02190	Service Charge	\$ 18.00
12-22-23	TD Bank	754 main St Weymouth, MA 02190	Service Charge	\$ 18.00

