

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance 23 JAN 23 AM 9: 10

(Candidate's signature)

Fill in Reporting Period dates: Beginning Date: 1/1/20	File with: City or Town Clerk or Election Commis
III in Reporting Period dates: Beginning Date: 1/1/20	022 Ending Date: Dec 31, 2022
ppe 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)	Friends of Sarah Khatib Committee Name
Office Sought and District Frontier Drive, Walpole MA 02081	Name of Committee Treasurer 35 Frontier Drive, Walpole MA 02081
Residential Address	Committee Mailing Address E-mail:
one # (optional): (508) 505-4498	Phone # (optional):
SUMMARY BALANCI	E INFORMATION.
Line 1: Ending Balance from previous report	502.06
Line 2: Total receipts this period (page 3, line 11)	15
Line 3: Subtotal (line 1 plus line 2)	517.06
Line 4: Total expenditures this period (page 5, line	2 14)
Line 5: Ending Balance (line 3 minus line 4)	507.06
Line 6: Total in-kind contributions this period (pag	ge 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: TD Bank	
dayit of Committee Treasurer: tify that I have examined this report including attached schedules and it is, to the best or vity, including all contributions, loans, receipts, expenditures, disbursements, in-kind co nee activity of all persons acting under the authority or on behalf of this committee in an need under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign
Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the bactivity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting processing the committee of	best of my knowledge and belief, a true and complete statement of all campaign fina ordance with the requirements of M.G.L. c. 55. I have not received any contribution period.
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 the under the penalties of periury:	in-kind contributions and liabilities for this reporting period and represents the

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

ort all receipts. Please include your committee name and a page number on each page.)

Date Received	ease include your committee name and a pa Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
ate Received			200 E 2
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			The La Builting Release from page
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			Classification Subs-of RandT 18 sec.T
			Stock (chinal to omist Alock)
Line 9: Total Re	ceipts over \$50 (or listed above)		
	eceipts \$50 and under* (not listed above)	1	5
	L RECEIPTS IN THE PERIOD	4	.5 ← 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)	
The state of the s	Topicy stages no makings			
		444444		
The production of the state of				
		Learning Control		
ne 9: Total Receipts	over \$50 (or listed above)			
ne 10: Total Receipt	s \$50 and under* (not listed above)			
ne 11: TOTAL RE	CEIPTS IN THE PERIOD	←	Enter on page 1, line 2	

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,

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to from committee records, and reported on line 13.

e include your committee name and a page number on each page.)

Date Paid	Expenditures" attachment is ava tures. Please include your comn To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Latu				The same statement of
		Mary Community of the C		
Programme State College State				
				An Administration of the Control of
				Communication of the communica
		Line 12: Total Expendit	ures over \$50 (or listed above)	
		Line 13: Total Expenditu	ares \$50 and under* (not listed above)
	Confidence property as established		ENDITURES IN THE PERIOD	
	Enter on page 1, line	LANCIT. ICIAL EAG.	ine 13 should include only those expend	itures not itemize

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 above.

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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The solution of the solution o				

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		Laurentee		
	1	Line 12: Expenditures over \$5	50 (or listed above)	
	I mail and means of the first	Line 13: Expenditures \$50 and under* (not listed above)		
	also del transcamo	Line 14: TOTAL EXPENDI	F	

^{*} 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.

ate Received	From Whom Received*	Residential Address	Description of Contribution	Value
	1			
	(or bland share)		utions over \$50 (or listed above)	
			ations \$50 & under (not listed above	"
	Enter on page 1, line 6	→ Line 17: TOTAL IN-KI	ND CONTRIBUTIONS	

^{*} 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
	,			
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	DING LIABILITIES (ALL)	0

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