

Fill in Reporting Period dates:

Form CPF M 102: Campaign Finance/Report

07/05/2023

Beginning Date:

Municipal Form
Office of Campaign and Political Finance

AM 9: 07

Ending Date:

TOWN OF WALPOLE File with: City or Town Clerk or Election Commission

12/31/2023

Type of Report: (Check one)					
8th day preceding preliminary 8th day preceding election	☐ 30 day after election ☑ year-end report ☐ dissolution				
Sarah Khatib	Friends of Sarah Khatib				
Candidate Full Name (if applicable)	Committee Name				
Walpole Select Board	Maher Khatib				
Office Sought and District	Name of Committee Treasurer				
35 Frontier Drive, Walpole MA 02081	35 Frontier Drive, Walpole MA 02081				
Residential Address	Committee Mailing Address				
Telephone Number (optional): (508) 505-4498	Telephone Number (optional):				
SUMMARY BALANC	E INFORMATION:				
Line 1: Ending Balance from previous report	\$205.50				
Line 2: Total receipts this period (page 3, line 11)	\$0.00				
Line 3: Subtotal (line 1 plus line 2)	\$205.50				
Line 4: Total expenditures this period (page 5, lin	e 14) \$0.00				
Line 5: Ending Balance (line 3 minus line 4)	\$205.50				
Line 6: Total in-kind contributions this period (pa	ge 6) \$0.00				
Line 7: Total (all) outstanding liabilities (page 7)	\$0.00				
Line 8: Name of bank(s) used: TD Bank					
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: (Treasurer's signature) Date: 01/03/2024					
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)					
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 activity, of all persons acting under the authority or on behalf of this committee in ac incurred any liabilities nor made any expenditures on my behalf during this reporting	best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period.				
Candidate without Committee OR Candidate with independent activity filing separate 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 committee in accordance with the requirements of M.G.L. c. 55.					
Signed under the penalties of periury:	(Candidate's signature) Date: 01/03/2024				

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)
Line 9: Total Rece	ipts over \$50 (or listed above)		
Line 10: Total Reco	eipts \$50 and under* (not listed above)	\$0.00	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	\$0.00	← 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 A: RECEIPTS (continued)

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
111			
ine 9: Total Receip	ts over \$50 (or listed above)	\$0.00	
	ots \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD	\$0.00	← Enter on page 1, line 2
me an a official			d 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.)

Date Paid	To Whom Paid	Address	Purpose of Expenditure	Amount
Date Paid	(alphabetical listing)	Address	Turpose of Expenditure	Amount
			W.	
	1			
	L			
		1		
			[
		III.	111	
		Line 12: Total Expenditure	es over \$50 (or listed above)	\$0
		Line 13: Total Expenditure	s \$50 and under* (not listed above)	\$0
			DITURES IN THE PERIOD	\$0

^{*} 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	Addmin	D	
Date Faid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
				L
		Line 12: Expenditures over \$50	(or listed above)	\$0.0
		Line 13: Expenditures \$50 and under* (not listed above)		
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	
	10,		haveld include only these evnenditures	

^{*} 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
		Line 15: In-Kind Contributions	s over \$50 (or listed above)	\$0.00
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	→ Line 17: TOTAL IN-KIND 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)	\$0.00