



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 05/06/2021

Ending Date: 06/02/2021

Type of Report: (Check one)

8th day preceding preliminary 8th day preceding election 30 day after election ²¹ year-end report dissolution

Birgitta Elisabeth Kuehn

Candidate Full Name (if applicable)

Planning Board Town of Plymouth

Office Sought and District

18 Edgewater Drive, Plymouth, MA 02360

Residential Address

E-mail: birgitta.kuehn@gmail.com

Phone # (optional): 978-886-4026

Committee to Elect Birgitta Kuehn

Committee Name

Patricia N. Adelmann

Name of Committee Treasurer

34 Stockade Path, Plymouth, MA 02360

Committee Mailing Address

E-mail: pnadelmann@gmail.com

Phone # (optional): 617-838-7665

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

1000.05

Line 2: Total receipts this period (page 3, line 11)

800.00

Line 3: Subtotal (line 1 plus line 2)

1800.00

Line 4: Total expenditures this period (page 5, line 14)

1772.56

Line 5: Ending Balance (line 3 minus line 4)

27.44

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used: TD BANK Pinehills, Plymouth

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:

Patricia N. Adelmann

(Treasurer's signature)

Date: *6/4/2021*

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:

Birgitta E. Kuehn

(Candidate's signature)

Date: *6/4/2021*

Committee to Elect Birgitta Kuehn

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.)

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

Committee to Elect Birgitta Kuehn

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
05/15/2021	Cork and Table	23 Court Street Plymouth, MA 02360	Catering Thank you gathering	\$133.75
4/1-06/06/2021	DonorBox	5 3rd St Suite 900 San Francisco, CA 91403	Fees for online donations from April 1 to June 6, 2021	\$30.40
05/07/2021	Prospect Hill Company	1 Pinehurst Drive Plymouth, MA 02360	Campaign promotional mailings	\$980.00
05/11/2021	Prospect Hill Company	1 Pinehurst Drive Plymouth, MA 02360	Campaign promotional mailings	\$457.38
05/18/2021	Quinovative Marketing	16 Eagle Drive Plymouth, MA 02360	Social media promotions	\$120.00
05/20/2021	Stripe	510 Townsend Street San Francisco, CA 94103	Processing fees online donation	\$35.05
05/20/2021	TD BANK	2 Market Crossing Plymouth, MA 02360	Banking fees	\$16.00
Line 12: Total Expenditures over \$50 (or listed above)				1772.56
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1772.56

Enter on page 1, line 4 →

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



Form CPF R 1: Itemization of Reimbursements

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

Office of Campaign and Political Finance
One Ashburton Place, Room 411
Boston, MA 02108
(617) 979-8300

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

		Date of Reimbursement: <input type="text" value="May 24, 2021"/>
Name of Individual Being Reimbursed: <input type="text" value="James Yasinski"/>		
Committee Name: <input type="text" value="Committee to Elect Birgitta Kuehn"/>		
CPF ID Number (if applicable): <input type="text" value="n/a"/>	Telephone Number (optional): <input type="text" value="508-400-72"/>	

ITEMIZE EXPENDITURES IN EXCESS OF \$50

Date Paid	Vendor Name	Vendor Address	Purpose of Expenditure	Amount
5/15/2021	Cork and Table	23 Court Street Plymouth, MA 02360	Catering for campaign workers	\$133.75

(Include items listed on Page 2)

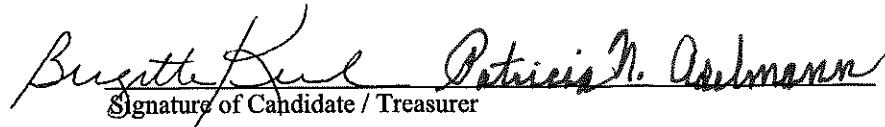
→

Line 1: Expenditures in excess of \$50 (itemized above):

Line 2: Expenditures \$50 or under (not itemized):

Line 3: TOTAL AMOUNT REIMBURSED:

Signed under the penalties of perjury:


Signature of Candidate / Treasurer

Date:

Please prepare a separate report for each reimbursement check issued by the committee.