



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Received by email 1/28/2024

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/06/2024 Ending Date: 01/27/2024

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)
Office Sought and District
Residential Address
E-mail:
Phone #:

Plymouth Coalition For Consumer Choice

Committee Name

Timothy M. Lawlor

Name of Committee Treasurer

60 Rocky Hill Road plymouth

Committee Mailing Address

E-mail: plymouthc4cs@gmail/com

Phone #:

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$19,225
Line 2: Total receipts this period (page 3, line 12)	\$5,000
Line 3: Subtotal (line 1 plus line 2)	\$24,225
Line 4: Total expenditures this period (page 5, line 15)	\$24,225
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6, line 18)	
Line 7: Total (all) outstanding liabilities (page 7, line 19)	
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	
Line 9: Name of bank(s) used:	Rockland Trust

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:

1/28/24

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:

(Candidate's signature)

Date:

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule E Liabilities. *Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.*

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
01/11/2024	Pick up mass corp 155 federal way suite 700 boston, ma	5,000	

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 E. 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
1/08/2024	Mayflower stragities	712 h street NE suite 2810 washinton DC 20002	petition signer follow up mailer general universe mail @ general universe mailer #3	17,285.00
			digital advertising robo call consulting	
01/16/2024	Mayflower strategies	same	get out vote paid call program election day gotv/logistics	5200.00
01/08/2024	tim lawlor	60 rocky hill rd plymouth ma 02360	coffee donuts for meeting	103.00
01/16/2024	Mamma mia plymouth	plymouth ma	food for gathering for electiion	234.23
01/13/2024	Young americans club	plymouth ma	meeting for election results	263.00
01/26/2024	Pioppi's package store	plymouth ma	advertising and signs	\$1,000
01/26/2024	Tim Lawlor	60 rocky hill rd	coffee, donuts, food for meetings.	\$140.00

Enter expenditure totals on Page 5