

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: Januar	ry 1, 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
Jonathan R. Eaton Candidate Full Name (if applicable) Town Moderator Office Sought and District 78 Glen Road, Wilmington, MA 01887 Residential Address E-mail: jonathanreaton@gmail.com Phone # (optional): 978 761-2835	Committee to Elect Jonathan Eaton Committee Name Richard A. Eaton Name of Committee Treasurer 41 Garden Avenue, Wilmington, MA 01887 Committee Mailing Address E-mail: rickeaton41@gmail.com Phone # (optional): 978 658-6461
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 5) Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used: Reading Cooperative	ge 6) 0 0
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo Candidate with 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 actinicurred any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: Treasurer's signature Date: Treasurer's signature

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.)

	Name and Residential Address (alphahetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)	
Date Received	(alphabetical listing required)	Amount	(101 CONTINUED OF \$100 OF MOTO)	
			<u>/</u>	
			1	
	·			
		_]		
	•			
Line 9: Total Rec	eeipts over \$50 (or listed above)		2 .	
I : 10, T-+-1 D-	ceipts \$50 and under* (not listed above)			
Line IU: Total Re	ccipis \$50 and under (not inseed above)			
7 11. TOTAL	RECEIPTS IN THE PERIOD		○ ← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(aiphabetical noting 1-1		
2.5			
	·	J	
	·		
Line 9: Total Rec	ceipts over \$50 (or listed above)		o
Line 10: Total Re	ceipts \$50 and under* (not listed above)		
11. TOTAL	RECEIPTS IN THE PERIOD		○ ← 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 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

Date Paid	To Whom Paid (alphabetical listing)	ittee name and a page number Address	Purpose of Expenditure	Amount
	•			
	·			
1				
	. /	-		
			res over \$50 (or listed above)	
	•		res \$50 and under* (not listed above) [
	Enter on page 1, line 4	→ Line 14: TOTAL EXPE	NDITURES IN THE PERIOD ne 13 should include only those expend	

^{*} 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
100				
	·			
	•			
	•			
:				
			**	
4.	J L	Line 12: Expenditures over \$	50 (or listed above)	
	•	Line 13: Expenditures \$50 an		
	Enter on page 1, line 4 -	Line 14: TOTAL EXPEND	ITURES IN THE PERIOD	

^{*} 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
Transmitted in the second seco				
and the second s	·			
	. /			
	,			
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	
	Line 16: In-Kind Contributions \$50 & under (not listed above)) (
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	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.

Page 6

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
	·			
	·			
		<i>y</i>		
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	0