



Commonwealth of Massachusetts

Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE MUNICIPAL FORM

Office of Campaign and Political Finance

REC SOMERSET CLERK
JAN 30 2023 PM 3:34

File with: City / Town Clerk or Election Commission

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

CANDIDATE: Full Name: Jamison Souza
 Residential Address: 2290 Riverside Ave
 City / State / Zip: Somerset MA 02726
 E-Mail Address: JamisonSouza@Me.com Phone #: 508 673-5022
 Party Affiliation: _____ (If applicable)

OFFICE SOUGHT/PURPOSE:
 Title: Selectman
 District: Town of Somerset

COMMITTEE: Name of Committee: Committee to Elect Jamison Souza
 (The name of the committee must include the candidate's last name)
 Committee Mailing Address: 2290 Riverside Ave
 City / State / Zip: Somerset MA 02726 Phone #: 508 254-7928

OFFICERS:

Chair: <u>Jennifer Souza</u> Residential Address: <u>2290 Riverside Ave</u> City / State / Zip: <u>Somerset MA 02726</u> Phone #: <u>508 243-4789</u>	Treasurer*: <u>Shannon Martin</u> Residential Address: <u>133 Cusick Ln</u> City / State / Zip: <u>Somerset MA 02726</u> Phone #: <u>508 615 5308</u> Email: <u>shannonmartin@comcast.net</u> <small>*A public employee may not serve as treasurer of any political committee (see reverse).</small>
Other Officer/Title: _____ Residential Address: _____ City / State / Zip: _____ Phone #: _____	Other Officer/Title: _____ Residential Address: _____ City / State / Zip: _____ Phone #: _____

(Complete and attach a Form CPF M A 101, if necessary, with other officers and finance committee, if any.)

I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature] Date: 1/27/23
Candidate's signature

I hereby accept the office of Treasurer of the above-named committee. I affirm that I am not a public employee as defined by M.G.L. c. 55, s. 13. I understand that: 1) I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election; 2) if after my acceptance of this office I become an appointed public employee, I must resign this position and notify OCPF of my resignation; and 3) a candidate may not serve as treasurer of the political committee organized on his/her behalf.

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature] Date: 1/27/2023
Treasurer's signature

I hereby accept the office of Chairman of the above-named committee.

SIGNED UNDER THE PENALTIES OF PERJURY:

[Signature] Date: 1/27/23
Chair's signature

(617) 979-8300

(800) 462-OCPF

E-mail: ocpf@cpf.state.ma.us

Web site: www.ocpf.us

Twitter: [@OCPFreports](https://twitter.com/OCPFreports)

Revised 6/2021



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

REC SOMERSET CLERK
APR 2 2023 PM 1:41

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date 1/1/2023 Ending Date: 3/24/2023

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Junison Souza
Candidate Full Name (if applicable)
Selectman Junison Souza
Office Sought and District
2290 Riverside Ave Somerset MA 02726
Residential Address
 E-mail: junison.souza@me.com
 Phone # (optional): _____

Committee to Elect Junison Souza
Committee Name
Shannon Martin
Name of Committee Treasurer
2290 Riverside Ave Somerset MA 02726
Committee Mailing Address
 E-mail: junison.souza@me.com
 Phone # (optional): 507-673-5022

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>13400.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>13400.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>3040.86</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>10359.14</u>
Line 6: Total in-kind contributions this period (page 6)	<u>150.00</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>622.71</u>
Line 8: Name of bank(s) used:	<u>Mechanics Cooperative Bank</u>

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: Shannon Martin (Treasurer's signature) Date: 4/1/2023

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 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.

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 perjury: [Signature] (Candidate's signature) Date: 4/1/23

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)
2/10/23	Ames, Peter Somerset 135 Marlborough Ave 02726	100.00	
2/10/23	Ashley, David Somerset 107 Lynch Ave 02726	100.00	
2/10/23	Bailey, Jennifer Somerset 102 Lincoln Ave 02726	25.00	
3/13/23	Bailey, Jennifer Somerset 102 Lincoln Ave 02726	60.00	
2/20/23	Bertoni, Nancy 02726 472 Briggs Rd Westport	500.00	retired
3/17/23	Berube, David Somerset 233 Forest Ave 02726	100.00	
2/10/23	Berges, Lisa Somerset 2396 Riverside Ave 02726	20.00	
2/10/23	Bronhard, Anne 02724 525 Center St Fall River	100.00	
2/6/23	Burke, James P 02726 16 Wood St Somerset	100.00	
2/10/23	Camara, Linda 02702 4 Mulbone Rd Assonet	100.00	
2/10/23	Camara, Robert Somerset 804 Lees River Ave 02725	120.00	
2/10/23	Carreiro, David Somerset 230 Park St 02726	100.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 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)
2/10/23	Chris, Elizabeth Somerset 387 Westhill Ave 08726	100.00	
3/17/23	Chris, Elizabeth Somerset 387 Westhill Ave 08726	100.00	
2/10/23	Deborah, Bill Longwood 439 W. 2nd St 08722	100.00	
2/10/23	Donald, Pippine Trenton 1022 Franklin St 08611	100.00	
2/10/23	Paul, Anthony Allentown 20 Walnut Ave 08720	100.00	
2/10/23	Fiona, Paul Somerset 175 Mt Hope Rd 08726	100.00	
3/10/23	Fiona, Paul Somerset 175 Mt Hope Rd 08726	40.00	
2/10/23	Georg, Shawn Somerset 120 O'Neil Rd 08725	100.00	
2/9/23	Haddad, Pat Somerset 252 Marble St 08726	100.00	
3/10/23	Haddad, Selma Somerset 2662 Riverside 08726	100.00	
2/10/23	Harvey, Lesley 08726 503 High St Somerset	100.00	
2/10/23	Hirley, John Swansea 220 Ocean View Ave 08777	100.00	
3/17/23	Hirley, John Swansea 220 Ocean View Ave 08777	40.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 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

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
2/7/23	King, Paul 2083 ... Somerset	200.00	
3/1/23	King, Paul 4 ... Somerset	200.00	
2/10/23	Marziska, Steven 55 ... Somerset	100.00	
2/6/23	Michael, Michael 35 ... Somerset	50.00	
2/10/23	Michael, Michael 35 ... Somerset	20.00	
3/17/23	Michael, Michael 35 ... Somerset	20.00	
2/10/23	Massachusetts Backlayers 550 ... Boston MA 02129	125.00	
2/10/23	Moore, Renee 49 ... Somerset	100.00	
3/17/23	McNamara, Holly 24 ... Somerset	100.00	
3/8/23	Mull, Greg 40 ... Somerset, CT	100.00	
2/10/23	Michael, Russell 197 ... Somerset	50.00	
3/17/23	Michael, Russell 197 ... Somerset	40.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

Committee Name: Committee to elect James Vucich

Page: 4

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
2/16/23	Nedac, Susan 11 Sublime Somerset 02777	100.00	
2/10/23	Postema, Michael 47 Fenway Pl. Somerset 02746	100.00	
3/13/23	Perce, David 15 Saddleback Terrace Somerset 02726	100.00	
2/9/23	Perce, Richard 15 Saddleback Ter 02726	250.00	Attorney - Roberts, Carroll Feldstein - Perce
3/12/23	Perce, Richard 15 Saddleback Ter 02726	500.00	Attorney - Roberts, Carroll, Feldstein - Perce
2/10/23	Percy, Thomas 20 Cherry St Wrentham MA 02793	1000.00	Attorney - Percy Law Group
2/10/23	Pimental, James 210 Dwelly Rd Somerset 02726	50.00	
3/17/23	Pimental, James 210 Dwelly Rd Somerset 02726	40.00	
2/10/23	Pineault, Bradford 7 Village Ed Lakeville MA 02347	100.00	
2/10/23	Pineault, Meghan 7 Village Ed Lakeville MA 02347	100.00	
2/10/23	Ponte, Clifford 1217 Meridian St Fall River 02720	1000.00	CoOwner - Keller Williams Realty, South Wampanoag
3/16/23	Puccini-Sullivan, Sharon 4019 Riverside Somerset 02726	120.00	
2/10/23	Puccini, Matthew 4019 Riverside Somerset 02726	100.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
2/11/23	Schubert, John 447 Highland Ave Somerset MA 02726	100.00	
2/10/23	Shuter, William 20 Stone Hill Ln Somerset	100.00	
3/2/23	Silva, David 227 Longview Dr Somerset MA 02726	300.00	Veterinarian - UVC
3/14/23	Suzza, John 272 River St Somerset MA 02726	500.00	Attorney - Self
1/27/23	Suzza, Johnson 2290 Riverside Ave Somerset MA 02726	500.00	Co-owner Keller Williams Realty, Westfield
1/19/23	Suzza, Stephen 25 Billys Ln Somerset MA 02726	500.00	retired
2/10/23	Suzza, Stephen 25 Billys Ln Somerset MA 02726	250.00	retired
3/13/23	Suzza, Stephen 25 Billys Ln Somerset MA 02726	20.00	retired
2/10/23	Sowersby, Craig 23 Main St #1W Somerset MA 02726	100.00	
2/10/23	Talbot, Matthew 4 Williams Ct Somerset MA 02725	100.00	
2/9/23	Tannenwall, Jane 55 Chestnut Rd Somerset MA 02726	100.00	
2/10/23	Taylor, Robert 11 Woodland Dr Somerset MA 02726	50.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← 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)
3/4/23	Taylor, Robert 0726 11 Woodland Dr Somerset	80.00	
3/13/23	UFOW Local 305 0708492 MP PAC 2725 Irvington Rd Somerset NJ 08854	200.00	
2/10/23	Viera, Jordan Somerset 60 Roosevelt Ave 0726	100.00	
2/10/23	Voss, Elizabeth 62 Myers Ave Somerset NJ 0726	100.00	
2/10/23	Walsh, Jared Somerset 231 Palmer St 0726	60.00	

Line 9: Total Receipts over \$50 (or listed above) 10,490.00

Line 10: Total Receipts \$50 and under* (not listed above) 2,910.00

Line 11: TOTAL RECEIPTS IN THE PERIOD 13,400.00

← 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, 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
2/12/23	Act Blue	366 Summer St Somerville MA 02144	website usage fee	97.40
3/5/23	Act Blue	366 Summer St Somerville MA 02144	website usage fee	7.90
3/12/23	Act Blue	366 Summer St Somerville MA 02144	website usage fee	15.20
3/19/23	Act Blue	366 Summer St Somerville MA 02144	website usage fee	24.49
2/12/23	AKB Marketing	194 Richard St Dartmouth MA 02747	2/10 event photography	275.00
3/10/23	American League Post 228	55 Roosevelt Ave Somerset MA 02726	2/10 event hall use	200.00
2/10/23	Brian Mancini	222 Highview Ave Somerset MA 02726	2/10 event music	125.00
3/1/23	Facebook	1 Hacker Way Menlo Park CA 94025	Ad expenses 2/24/23 - 2/27/23	43.27
3/17/23	Facebook	1 Hacker Way Menlo Park CA 94025	Ad expenses 2/27/23 - 3/16/23	50.00
2/15/23	Gus' Pizza	582 South St Somerset MA 02726	2/10 event food	265.00
2/10/23	Joe Peixoto	62 Waring St Fall River MA 02720	2/10 event music	125.00
2/10/23	Mechanics Cooperative Bank	1236 County St Somerset MA 02726	temporary checks fee	2.00
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				

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.



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

REC SOMERSET CLERK
MAY 9 2023 PM 2:33

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 3/25/2023 Ending Date: 4/30/2023

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Jamison Souza
Candidate Full Name (if applicable)
Selectman Town of Somerset
Office Sought and District
2290 Riverside Ave Somerset MA 02726
Residential Address
 E-mail: jamisonsouza@mc.com
 Phone # (optional): _____

Committee to Elect Jamison Souza
Committee Name
Shannon Martin
Name of Committee Treasurer
2290 Riverside Ave Somerset MA 02726
Committee Mailing Address
 E-mail: jamisonsouza@mc.com
 Phone # (optional): 508-673-5022

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>10359.14</u>
Line 2: Total receipts this period (page 3, line 11)	<u>1220.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>11579.14</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>9354.53</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>2224.61</u>
Line 6: Total in-kind contributions this period (page 6)	<u>342.72</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>Mechanics Cooperative Bank</u>

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: Shannon Martin (Treasurer's signature) Date: 5/4/2023

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 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.

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 perjury: _____ (Candidate's signature) Date: 5/4/2023

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)
4/10/23	Bertuncini, Nancy 47E Briggs Rd Westport 02790	500.00	retired
4/10/23	Mollicone, Ann 1500 Vine St Somerset 02726	150.00	
4/3/23	Murray, Thomas 2500 County St Somerset 0276	100.00	
3/29/23	Rebello, Donald 02726 195 Colonial Dr Somerset	50.00	
4/7/23	SKarpos, Konstantinos 2482 County St Somerset 02726	100.00	
Line 9: Total Receipts over \$50 (or listed above)		900.00	
Line 10: Total Receipts \$50 and under* (not listed above)		320.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1220.00	← 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 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
4/2/23	Act Blue	366 Summer St Somerville, MA 02144	website usage fee	1.98
4/25/23	AKB Marketing	194 Richard St Dartmouth, MA 01919	video and photo services	550.00
4/1/23	American Legion Post 228	55 Roosevelt Ave Somerset MA 02706	3/17 event food	622.71
4/11/23	Christopher Souza	80 Hanover St Fall River MA 02720	Campaign sign frame lumber	79.16
3/31/23	Express Printing	102 County St Fall River MA 02723	signs, sign stands, postcards, emery boards	7,263.04
3/27/23	Facebook	1 Hacker Way Menlo Park, CA 94025	Ad expenses 3/2/23 - 3/26/23	50.00
3/30/23	Facebook	1 Hacker Way Menlo Park CA 94025	Ad expenses 3/26/23 - 3/29/23	50.00
3/31/23	Facebook	1 Hacker Way Menlo Park CA 94025	Ad expenses 3/28/23 - 3/30/23	50.00
4/1/23	Facebook	1 Hacker Way Menlo Park, CA 94025	Ad expenses 3/29/23 - 3/30/23	6.21
4/4/23	Facebook	1 Hacker Way Menlo Park CA 94025	Ad expenses 3/30/23 - 4/4/23	50.00
4/6/23	Facebook	1 Hacker Way Menlo Park CA 94025	Ad expenses 4/3/23 - 4/5/23	50.00
4/8/23	Facebook	1 Hacker Way Menlo Park CA 94025	Ad expenses 4/5/23 - 4/7/23	50.00
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				

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.

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4/10/23	Facebook	1 Hacker Way Menlo Park, CA 94025	Ad expenses 4/7/23 - 4/9/23	50.00
4/10/23	Facebook	1 Hacker Way Menlo Park CA 94025	Ad expenses 4/7/23 - 4/8/23	50.00
4/18/23	Pickled Deli	128 Slade's Ferry Ave Somerset MA 02726	Lunch for town hall employees	257.87
4/8/23	Rise Cafe	900 County St Somerset MA 02726	4/8 event food	173.56
Line 12: Expenditures over \$50 (or listed above)				9354.53
Line 13: Expenditures \$50 and under* (not listed above)				—
Line 14: TOTAL EXPENDITURES IN THE PERIOD				9354.53

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 M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

REC SOMERSET CLERK
JAN 18 2024 AM 10:09

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 5/1/2023 Ending Date: 12/31/2023

Type of Report: (Check one)

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

Jamison Souza
Candidate Full Name (if applicable)
Selectman Town of Somerset
Office Source and District
2290 Riverside Ave Somerset MA 02726
Residential Address
E-mail: jamisonsouza@me.com
Phone #

Committee to Elect Jamison Souza
Committee Name
Shannon Martin
Name of Committee Treasurer
2290 Riverside Ave Somerset MA 02726
Committee Mailing Address
E-mail: jamisonsouza@me.com
Phone # 508-673-5022

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>2224.61</u>
Line 2: Total receipts this period (page 3, line 12)	<u>2000.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>4224.61</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>3715.38</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>509.23</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>0</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>2000.00</u>
Line 9: Name of bank(s) used:	<u>Mechanics Cooperative Bank</u>

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: Shannon Martin (Treasurer's signature) Date: 1/17/2024

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: [Signature] (Candidate's signature) Date: 1/17/24

