



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report

## Municipal Form

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Office of Campaign and Political Finance

2021 APR -1 AM 10:58

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Jan 1, 2021 Ending Date: Mar 23, 2021

Type of Report: (Check one)

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

Dawn Seivers  
Candidate Full Name (if applicable)

Dedham School Committee  
Office Sought and District

1000 Presidents Way, Apt 1405, Dedham MA 02026  
Residential Address

E-mail: dawnseivers@gmail.com

Phone # (optional): (617) 877-2596

Dawn Seivers for Dedham School Committee  
Committee Name

Ryan C. Seivers  
Name of Committee Treasurer

1000 Presidents Way, Apt 1405, Dedham MA 02026  
Committee Mailing Address

E-mail: dawnfordsc@gmail.com

Phone # (optional): (443) 599-2016

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	2,301
Line 3: Subtotal (line 1 plus line 2)	2,301
Line 4: Total expenditures this period (page 5, line 14)	1,501.55
Line 5: Ending Balance (line 3 minus line 4)	799.45
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	1,500
Line 8: Name of bank(s) used: <u>Citizens 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: Ryan Seivers (Treasurer's signature) Date: 4-1-2021

#### 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: Dawn Seivers (Candidate's signature) Date: 4/1/21

## 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)
Sudesh Prasad	1016 Miner Ave San Pablo CA 94806	100	
Robert Coughlin	125 Adams St Dedham MA 02026	100	
Timothy Call	99 Damon Rd Needham MA 02494	86	
Dawn Seivers	1000 Presidents Way #1405 Dedham MA 02026	1,500	SVP of Client Services, Officeworks Inc. (LOAN TO CAMPAIGN)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>			← 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)
Line 9: Total Receipts over \$50 (or listed above)		1,786	
Line 10: Total Receipts \$50 and under* (not listed above)		515	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		2,301	← 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
3/1	The Dedham Times	395 Washington St, #1, Dedham MA 02026	Advertisement for Campaign Kick Off	144
3/4	Connolly Printing LLC	17B Gill St, Woburn MA 01801	Signs, Stakes, Masks	1,144.82
3/10	East Dedham Builders Supply	187 Milton St, Dedham MA 02026	Strapping for sign holds	143.44
3/11	Home Depot	1213 VFW Parkway, West Roxbury MA 02132	Staple gun, staples, heavy duty stapler, zip ties	59.3
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → <b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				

\* 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
Line 12: Expenditures over \$50 (or listed above)				1,491.56
Line 13: Expenditures \$50 and under* (not listed above)				9.99
<b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				<b>1,501.55</b>

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 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 over \$50 (or listed above)	
			Line 16: In-Kind Contributions \$50 & under (not listed above)	
			<b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>	<b>0</b>

\* 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.

## 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
2/19	Dawn Seivers	1000 Presidents Way #1405 Dedham MA 02026	LOAN for Campaign	1,500
Enter on page 1, line 7 →			<b>Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)</b>	1,500

**Dedham Times, Inc.**

**395 Washington St  
Dedham, MA 02026**

DATE	INVOICE #
3/8/2021	34312

**PAID  
03/08/2021**

<b>BILL TO</b>
Seivers, Dawn, Committee 1000 Presidents Way, Apt. 1405 Dedham, MA 02026

P.O. NO.	TERMS	PROJECT

QUANTITY	DESCRIPTION	RATE	AMOUNT
	Display ad in 3/5 issue: 'Virtual Campaign Kick-Off!'	144.00	144.00
		<b>Total</b>	<b>\$144.00</b>



# CONNOLLY PRINTING

178 Gill Street, Woburn MA 01801 • 781-932-8885  
**ConnollyPrinting.com • 800-406-7206**

Fax: (781) 932-8544  
 Email: kevinc@connollyprinting.com  
 Website: http://www.connollyprinting.com

Invoice	
Date	Invoice #
2/26/2021	29848

Bill To

Committee to Elect Dawn Seivers  
 MA

P.O. No.	Terms	Due Date	Rep	Ship Via	Woburn
	due on receipt	3/5/2021	KC		F.O.B

Description	Item Code	Quantity	Price Each	Amount
<b>Product: Corrugated Plastic Signs</b> • 24 in x 18 in - Corrugated Plastic Sign • Double Sided • Corrugated Plastic 4 mil • 2 Ink Colors: Nazdar 4200 Series - Black, Nazdar 4200 Series - PMS 185 fire red		50	\$7.39	\$369.50
<b>Product: Frames or Stakes</b> • 50 H-Frame		50	\$1.25	\$62.50
<b>Product: Polycoated Signs</b> • 28 in x 22 in - Polycoated sign • Single Sided • Polycoated .024 • 2 Ink Colors: Nazdar 4200 Series - Black, Nazdar 4200 Series - PMS 185 fire red		50	\$6.63	\$331.50
<b>Product: Retail Textiles</b> 1. ) Retail Textiles 48Bayside 1900 3-Ply Mask B-1900-FM \$: 6.95 Ea. .... <b>Total \$: 333.60</b> • A. ) 48 White; 48 OS @ \$:6.95 Ea.,		48	\$6.95	\$333.60

Thank you for doing business with Connolly Printing.	<b>Subtotal:</b>	\$1,097.10
In the event the customer doesn't pay in accordance to the payment terms above, the customer agrees to pay a late charge of 1.8% per month of the total amount of any late payment. The customer also agrees to pay any collection expenses incurred to collect any unpaid amounts, including reasonable attorney's fee due to litigation arising out of collection of any unpaid amounts owed by customers. Pricing assumes a 2% discount for cash or checks. The 2% cash discount does not apply to credit cards and will be added back.	<b>(6.25%)</b>	\$47.72
	<b>Total:</b>	\$1,144.82
	<b>Payments/Credits</b>	\$0.00
	<b>Balance Due</b>	\$1,144.82



187 Milton St.  
Dedham, MA 02026  
Phone: (781) 326 - 1100  
Fax: (781) 320 - 0919  
www.edbs.com

Qty	Item Name	Orig Price	Disc %	Price	Ext Price
3	Bundle 1"x3"x12' Strapping	\$45.00		\$45.00	\$135.00

Subtotal: \$135.00  
Local Sales Tax 6.25 % Tax: + \$8.44  
**RECEIPT TOTAL: \$143.44**

Job Name:

**PAID**

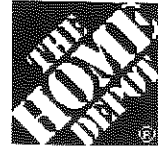
CK # 103

All claims and returned goods must be accompanied by this bill within 10 days.  
15% handling charge on all returned merchandise.

Interest (FINANCE CHARGE) at 1 1/2% per month charged on all accounts past due for 30 days.  
Annual Percentage Rate - 18%

113965





How doers  
get more done.

WEST ROXBURY MA 02132 (617)327-5000  
JOIN OUR TEAM! CAREERS.HOMEDEPOT.COM

2665 00052 73305 03/11/21 11:24 AM  
SALE SELF CHECKOUT

079055021148	STAPLES <A>	3.14
	ARROW 1/4" JT21/T27 STAPLES 1000PK	
079055835127	508SS1 <A>	13.64
	ARROW 1/2 T50 STAINLESS STAPLE 1000P	
713153293570	CABLE TIES <A>	4.27
	CE 14" BLK UV RESIST CABLE TIE 20PK	
4715409150572	CABLE TIES <A>	4.27
	CE 14" NATURAL CABLE TIE 20PK	
079055582175	P21 STAPLER <A>	10.47
	ARROW P21 PLIER STAPLER	
079055000501	STAPLE GUN <A>	19.97
	ARROW T50 HEAVY-DUTY STAPLE GUN	
0000-999-533	BAG FEE .05 <B,U>	0.05N
	BAG FEE - 5 CENTS	

SUBTOTAL	55.81
SALES TAX	3.49
TOTAL	\$59.30

XXXXXXXXXXXX9993 DEBIT USD\$ 59.30

AUTH CODE 002595  
Chip Read Verified By PIN  
AID A0000000980840 US DEBIT

<U> - NON-DISCOUNTABLE ITEM

2665 03/11/21 11:24 AM



2665 52 73305 03/11/2021 5161

RETURN POLICY DEFINITIONS			
POLICY ID	DAYS	POLICY EXPIRES ON	
A	1	180	09/07/2021
B	2	-	NO REFUNDS

Due to COVID-19, we have extended our returns policy for most items. Please see homedepot.com for details.

\*\*\*\*\*

**DID WE NAIL IT?**

Take a short survey for a chance TO WIN  
A \$5,000 HOME DEPOT GIFT CARD

Opine en español

[www.homedepot.com/survey](http://www.homedepot.com/survey)

User ID: H88 149564 146951  
PASSWORD: 21161 146899

Entries must be completed within 14 days of purchase. Entrants must be 18 or older to enter. See complete rules on website. No purchase necessary.