



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2021 Ending Date: 3/23/2021

Type of Report: (Check one)

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

Committee to Elect Mona Sallabank  
Candidate Full Name (if applicable)

Parks and Recreation Commission  
Office Sought and District

11 Lindale Avenue, Dedham, MA 02026  
Residential Address

E-mail: Mona@ParksRec@gmail.com

Phone # (optional): 617-429-5706

Gregory M. Dignan  
Committee Name

Gregory M. Dignan  
Name of Committee Treasurer

11 Lindale Ave, Dedham, MA 02026  
Committee Mailing Address

E-mail: Mona@ParksRec@gmail.com

Phone # (optional): 617-429-5706

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>1,200</u>
Line 3: Subtotal (line 1 plus line 2)	<u>1,200</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>1,000</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$200</u>
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	<u>Dedham Savings 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: Gregory M. Dignan (Treasurer's signature) Date: 4-1-21

**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: Mona Sallabank (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)
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.

Income	Amount	First Name	Last Name	Address	City
Checks	\$25.00	Greg & Tara	Dignan	11 Lindale Ave	Dedham
	\$50.00	Rena	Megina	13 Parker Staples	Dedham
	\$100.00	Rita mae	Coleman	121 Garfield Rd	Dedham
Act Blue					
Date					
3/4/2021 14:51	\$100.00	Kris & Joe	Ahl	120 Commonwealth Ave	Dedham
3/4/2021 16:17	\$100.00	Julie	Bayiates	95 Lincoln Street	Dedham
3/4/2021 22:46	\$100.00	Marisa	Clasby	5 Calvin Road	Dedham
3/5/2021 9:48	\$50.00	Suzanne	Carroll	38 Westchester Circle	Dedham
3/6/2021 9:45	\$25.00	Mary Jane	Devins	38 Highland Street	DEDHAM
3/6/2021 21:09	\$100.00	Courtney	Valentine	15 Coach Lane	Dedham
3/7/2021 10:33	\$100.00	John	Heffernan	26 Brookdale Ave	Dedham
3/10/2021 18:32	\$100.00	Maggie	Kelly	18 Riverdale Rd	Dedham
3/21/2021 10:21	\$100.00	Cesar	Marina	16 Bayview Rd	E Sandwich
3/21/2021 14:37	\$50.00	Theresa	Brennan	93 commonwealth ave	Dedham
3/22/2021 12:07	\$100.00	Carnille	Zahka	216 Greenlodge Street	Dedham
3/22/2021 20:41	\$100.00	John	Heffernan	26 Brookdale Ave	Dedham
Total Income					
Through 3/23/2021	\$1,200.00				
Expences					
Checks	-\$35.00				
Signs/Pringtin	-\$1,040.00				
Donation CTE C. Polito	-\$25.00				
<b>Total Expences</b>	<b>-\$1,100.00</b>				
<b>Balance 3/24/2021</b>	<b>\$100.00</b>				

