

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

) Massachuseus	File with: City or Town Clerk or Election Commission		
Fill in Reporting Period dates: Beginning Date:	01/01/21 Ending Date: 12/31/22		
Type of Report: (Check one)	The state of the s		
8th day preceding preliminary 8th day preceding election	on 30 day after election year-end report dissolution		
Sun day preceding premimary our day preceding election	7 8 9 10 -		
George F. Miller	NOT APPLICABLE		
Candidate Full Name (if applicable)	RELEIVED ?		
Selectman-Berkley, MA Office Sought and District	Name of Committee Treasure AN 18 2023		
16 Parsons Walk, Berkley, MA 02779	TOWN CLERK		
Residential Address	Committee Mailing Address BERALLY, MASS		
E-mail: lawofficegmiller @aol.com	E-mail:		
Phone # (optional): 617-471-8865	Phone # (optional):		
CYMMADY DAT	ANCE INFORMATION:		
SUMMARY BALL	ANCE INFORMATION.		
Line 1: Ending Balance from previous report	t		
Line 2: Total receipts this period (page 3, lin	candidate funded \$2,818.19		
Line 3: Subtotal (line 1 plus line 2) \$2,818.19			
Line 4: Total expenditures this period (page 5, line 14) \$2,818			
Line 5: Ending Balance (line 3 minus line 4)			
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: NOT APPLICABLE			
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to activity, including all contributions, loans, receipts, expenditures, disbursements, ifinance activity of all persons acting under the authority or on behalf of this comm. Signed under the penalties of perjury:	the best of my knowledge and belief, a true and complete statement of all campaign finance in-kind contributions and liabilities for this reporting period and represents the campaign nittee in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date:		
FOR CANDIDATE FILINGS ONLY: Amdayit of Candidate; (che	cck 1 box only)		
Candidate with Committee I certify that I have examined this report including attached schedules and it activity, of all persons acting under the authority or on behalf of this committee incurred any liabilities nor made any expenditures on my behalf during this respectively.	is, to the best of my knowledge and belief, a true and complete statement of all campaign finance tee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions,		
I certify that I have examined this report including attached schedules and it finance activity, including contributions, loans, receipts, expenditures, disbut campaign finance activity of all persons acting under the authority or on behavior	rsements, in-kind contributions and habilities for this reporting period and represents the alf of this candidate in accordance with the requirements of M.G.L. c. 55.		
Signed under the penalties of perjury:	(Candidate's signature) Date: 01/12/23		

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.)

eport an receipts. 1	Please include your committee name and a pa	ge number on ea	
Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	Candidate-George F. Miller, 16 Parsons		Attorney
04/12/22	Walk, Berkley, MA 02779	\$996.67	
	Candidate-George F. Miller, 16 Parsons		Attorney
04/25/22	Walk, Berkley, MA 02779	\$1,821.52	
5			,
10.00			
Line 9: Total Rec	eipts over \$50 (or listed above)	\$2,818.19	
Line 10: Total Red	ceipts \$50 and under* (not listed above)	C	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	\$2,818.19	← 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.