



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RCVD:
12.7.17
2:00 PM
SPfld, MA

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/31/2017 Ending Date: 12/06/2017

Type of Report: (Check one)

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

LATONIA MONROE NAYLOR

Candidate Full Name (if applicable)

SPRINGFIELD SCHOOL COMMITTEE

Office Sought and District

107 RANNEY STREET, SPRINGFIELD MA 01108

Residential Address

E-mail: LATONIAMNAYLOR@GMAIL.COM

Phone # (optional):

NAYLOR COMMITTEE

Committee Name

WILLIE-MAE DYER

Name of Committee Treasurer

107 RANNEY STREET, SPRINGFIELD MA 01108

Committee Mailing Address

E-mail: LATONIA4SCHOOLS.COM

Phone # (optional): 413-455-0432

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	207.09
Line 2: Total receipts this period (page 3, line 11)	948.97
Line 3: Subtotal (line 1 plus line 2)	1,156.06
Line 4: Total expenditures this period (page 5, line 14)	912.09
Line 5: Ending Balance (line 3 minus line 4)	243.97
Line 6: Total in-kind contributions this period (page 6)	250
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	PeoplesBank

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: Willie Mae Dyer (Treasurer's signature)

Date: 12/07/2017

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: 12/07/2017

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)			
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 B: EXPENDITURES (continued)[illegible]

* 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
11/07/2017	LaTonia Monroe Naylor	107 Ranney Street, Springfield MA 01108	Food for Volunteers	250
Line 15: In-Kind Contributions over \$50 (or listed above)				250
Line 16: In-Kind Contributions \$50 & under (not listed above)				0
Line 17: TOTAL IN-KIND CONTRIBUTIONS				250

Enter on page 1, line 6 →

* 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
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	0