

Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Please print or type all information, except signatures.

teporting Period: Beginning: 66-14-2022 Ending: 01-20-2023
(MM/DD/YYYY) (MM/DD/YYYY)
ype of Report: (Check One)

Pursuant to M.G.L. Chapter 55: ☐ 8th day preceding preliminary/primary

☐ 8th day preceding election

30th day following election (town or special)

20th day of January (Year-End report)

- 1. I certify that I am a candidate for or currently hold Municipal Office.
 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
- 3. I certify that I do not have a political committee.

	ROS	59 Bung The	Man	DAVID Sheedy	1-11-23
	BOXZO CE HEDWA.	I CHENZER UN	The state of the s	Though a following	1-11-23
	Planning Board	2117 Washington St	Rack	Robert Kenn	EE-01:1
	Constable	330 Be/monts.	(Sohnt) on Seus-	Robert Van Deusen	E6-0H
	School conjustifier	15 May Jan DT.	Hodu litruur	Gordon Michimum	1-9-33
	1205535051	8 Lynn (ce Tene	A XX	STEVEN Soloni.	19-23
	Public Library	729 Bridge St	July & Man	Kelsey Holbrook	1-933
	CONSTAPLE	439 N. BEDFORD 5	Michael Turners	MICHAEL TRAVERS	1-5-23
	SCHOOL COMMITTEE	65 ROBINS ST	Rusure	REBECCA FIOLER	1-5-23
	Planning Book	59 Surry Love		Keepin M. Revily	1-5-23
	profic riprary	130 waterman st.	Head derumann	LEON HEIRMONN	1-3-03
	EB HOUSING	13TM deach	Mrakee !	Noruncahill	1-3-23
	OFFICE SOUGHT	RESIDENTIAL ADDRESS (Street and Number)	SIGNATURE Signed under the penalties of perjury	PRINT NAME	DATE
1					



Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

City or Town of: East Bridgeweth	City or Town of: East Bridgeweth				
East Bridgewater	East Bridgewater				
East Bridgewater	East Bridgewater				I
Fast Bridgewarter	Fast Bridgewarter		0. 22 77072	77	,
Enet Bridge and the	Frist Bridge and In				CITY OF TOWER OF.
				110	CITY OF LOWIN OF
I reas from or type an information, except all mines as	riease prim or type an information, except signatures.				2
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☐ 8th day preceding preliminary/primary ☐ 8th day preceding election ☐ 30th day following election (town or special) ☐ 20th day of January (Year-End report)

- Pursuant to M.G.L. Chapter 55:

 1. I certify that I am a candidate for or currently hold Municipal Office.

 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
- 3. I certify that I do not have a political committee.

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イルストー	Reby	6-8-9	6-8-07	6223	66-23	6-4-2	6-623	6397	6233	EE- F 9	61-23	DATE
Modul Show	1120425 V. Ducusarello	Robert Kenn	Robert Van Deessen	Gordon McKinny	STEVEN Solve	Kelsky Holbrook	MICHAEL TRAVERS	REBECCA FIOLER	Kewin M. Reil	Leah Herrmann	Norsen Cahill	PRINT NAME
Will HAMING	Ward I	Recke	Cooler Man Deuser	Attern Re Kurul	Mark Mari	4 100	Michael Tions	Reseateder	ARA J	Head Herrmann	Manch	SIGNATURE Signed under the penalties of perjury
to huma la	2 FIGUREST DR	2117 Washing to St	330 Belmont St.	15 Mayer Dr	& (hun) RE JOHN	729 Bridge St	439 N. BEDITAD ST	65 EOBINS ST.	59 Surrey Livre	130 waterman St	13 Trudiau LA	RESIDENTIAL ADDRESS (Street and Number)
S. A.	Scores CE HEADH.	Planning Bosol	Conslable	School Committee	ASSESSIESS	Public Library	CONSTABLE	SCHOOL COMMITTEE	אונייטיי הפל הסנתים	public library	ES HOSING	OFFICE SOUGHT



Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Please print or type all information, except signatures.

City or Town of:	East	East Bridgewater		
Reporting Period:	Beginning:	V	Ending:	05/06/2022
		(MM/DD/YYYY)		(MM/DD/YYYY)
Type of Report: (Check One)	One)			
☐ 8th day preceding p	reliminary/primary	☐ 8th day preceding preliminary/primary ■ 8th day preceding election	30th day following election (town or special)	20th day of January (Year-End report)
Pursuant to M.G.L. Chapter 55:	pter 55:			

- 1. I certify that I am a candidate for or currently hold Municipal Office.
- 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
- 3. I certify that I do not have a political committee.

Planning Board	2117 Washington SL	RICK	Robert Henn	5)16/22
ASSESSEC	8 your loss Tosserve	The the	STENEN Solar.	56 27
SELECTIMAN	SQ HWWA DR.	Mall Mall	Parvid sheedy	5/5/202
Public library	729 Bridge St	Wel Su-	Kelsey Holbrook	5/3/2022
CONSTABLE	439 N, BEOFFRO ST	Middle Graver	MICHAEL TRAVERS	5/3/2022
bimoing pound	59 Surrey Love		Keyin M Reily	74/715
Emplie Chorcan	130 materman st	that Howmann	LECT HEMMONN	4129122
EB HOUSING	13Trudeau LN	Jan Cakel	Norun Canill	16/88/17
OFFICE SOUGHT	RESIDENTIAL ADDRESS (Street and Number)	SIGNATURE Signed under the penalties of perjury	PRINT NAME	DATE
			5. I Cliniy mai i do hoi nave a ponitical committee.	o. I coming m



Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

REC'D EB TOWN CLERK

]	ile with: City or Town Cler	ck or Election Con	mission
Fill in Reporting Period dates:	Beginning Date:		Ending I)ate:		
Type of Report: (Check one) 8th day preceding preliminary	/ h day preceding election	☐ 30 day	after election	year-end report	dissolutio	on
Robert T Van	Deisen					
Candidate Full Name (if app		-		Committee Name		
Office Sought and Disp	St. E.Bridgaux	iter	Nar	ne of Committee Treasurer		
E-mail: DVd 71762C	ハツチャ フラ	E-mail:	Co	mmittee Mailing Address		
Phone # (optional):		Phone # (optional):			
	THE RESIDENCE AND A SECOND COMMENT	TE DIEG	DA CATITOR			
2	SUMMARY BALANC	E INFO	RMATION:		_	
Line 1: Ending Balance	from previous report					
Line 2: Total receipts the	is period (page 3, line 11))	F	5009		
Line 3: Subtotal (line 1]	plus line 2)		#52	,00		
Line 4: Total expenditur	es this period (page 5, lin	ne 14)	\$5	000		
Line 5: Ending Balance	(line 3 minus line 4)		9			
Line 6: Total in-kind con	ntributions this period (pa	age 6)				
Line 7: Total (all) outsta	Line 7: Total (all) outstanding liabilities (page 7)					
Line 8: Name of bank(s)) used:					
Affidavit of Committee Treasurer: I certify that I have examined this report including atta activity, including all contributions, loans, receipts, expensions activity of all persons acting under the authority	penditures, disbursements, in-kind	contributions	and liabilities for this	reporting period and repres of M.G.L. c. 55.	all campaign final	nce
Signed under the penalties of perjury:			(Treasurer's	signature) Date:		
Candidate with Committee I certify that I have examined this report including activity, of all persons acting under the authority incurred any liabilities nor made any expenditures	g attached schedules and it is, to the or on behalf of this committee in ac	e best of my k	h the requirements of	M.G.L. c. 55. I have not re-	ent of all campaign ceived any contrib	ı finance rutions,
Candidate without Committee I certify that I have examined this report including finance activity, including contributions, loans, re campaign finance activity of all persons acting un	ceipts, expenditures, disbursement	s, in-kind con is cardidate i	tributions and liabilit n accordance with the	ies for this reporting period a requirements of M.G.L. c.	and represents the	

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.)

Name and Residential Address (alphabetical listing required) Amount Occupation & Employer (for contributions of \$200 or more) 1	report all receipts. Please include your committee name and a page number on each page.)						
Holes Van Deuter B				Occupation & Employer			
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	Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)			
Line 10: Total Receipts \$50 and under* (not listed above) Line 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2	4/22	Robert Van Deusen 330 Beimont Stier	R 5000				
Line 10: Total Receipts \$50 and under* (not listed above) Line 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2							
Line 10: Total Receipts \$50 and under* (not listed above) Line 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2							
Line 10: Total Receipts \$50 and under* (not listed above) Line 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2							
Line 10: Total Receipts \$50 and under* (not listed above) Line 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2	5						
Line 10: Total Receipts \$50 and under* (not listed above) Line 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2							
Line 10: Total Receipts \$50 and under* (not listed above) Line 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2							
Line 10: Total Receipts \$50 and under* (not listed above) Line 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2							
Line 10: Total Receipts \$50 and under* (not listed above) Line 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2							
Line 10: Total Receipts \$50 and under* (not listed above) Line 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2				. *			
Line 10: Total Receipts \$50 and under* (not listed above) Line 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2							
Line 10: Total Receipts \$50 and under* (not listed above) Line 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2							
Line 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2	Line 9: Total Rece	ipts over \$50 (or listed above)					
				St			
* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.			0. Tim 10.1	1			

SCHEDULE A: RECEIPTS (continued)

Data Danima	Name and Residential Address	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	(tor contributions of \$200 of more)
	×		
	1		
ine 9: Total Recei	pts over \$50 (or listed above)		
ine 10: Total Rece	ipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		Enton on nage 1 line 2
me II: IVIAL K	CELLIDAY THE LEMON		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.)

report all expenditures. Please include your committee name and a page number on each page.)				
	To Whom Paid		- CT 17/	A
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
4/22	Greg Heger	474 N. Bedford	A Re-Elect strckers	\$5000
	t			9.
	·			
				- N
				F)
		Line 12: Total Expenditures ov	er \$50 (or listed above)	
		Line 13: Total Expenditures \$50		
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4



Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts File with: City or Town Clerk or Election Commission						
Fill in Reporting Period dates: Beginning Date: 3/18	3/2022	Ending Date: 5/6/2022				
Type of Report: (Check one)						
⊗ 8th day preceding preliminary □ 8th day preceding election	☐ 30 day	after election year-end report dissolution				
Rebecca Fidler	N/A					
Candidate Full Name (if applicable) School Committee		Committee Name				
Office Sought and District		Name of Committee Treasurer				
65 Robins Street East Bridgewater, MA 02333 Residential Address	-	Committee Mailing Address				
E-mail: rebeccaj.fidler@gmail.com	E-mail:	Committee Maining Address				
Phone # (optional): 508-641-6492	Phone # (optional):				
CHANAL DATE OF THE OPEN LETTON						
SUMMARY BALANCE INFORMATION:						
Line 1: Ending Balance from previous report 0.00						
Line 2: Total receipts this period (page 3, line 11)						
Line 3: Subtotal (line 1 plus line 2)						
Line 4: Total expenditures this period (page 5, line 14)						
Line 5: Ending Balance (line 3 minus line 4)		0-00				
Line 6: Total in-kind contributions this period (p	age 6)	0.00				
Line 7: Total (all) outstanding liabilities (page 7))	0.00				
Line 8: Name of bank(s) used: Chase Credit						
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: (Treasurer's signature) Date:						
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 b	oox only)					
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in a incurred any liabilities nor made any expenditures on my behalf during this reportire.	accordance wit	h the requirements of M.G.L. c. 55. I have not received any contributions,				
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, eccepts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	he best of my k	cnowledge and belief, a true and complete statement of all campaign tributions and liabilities for this reporting period and represents the				

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)
3/25/22	Rebecca Fidler 65 Robins 8+	212.50	LMHC-seld employed
4/1/22	Rebecca fidler 105 Robins St	268-28	LMHC- self employed
4/14/22	Rebecca Fidler \$5 Robins St	242.97	intic-selp employed
Line 9: Total Rece	ipts over \$50 (or listed above)	0.00	
Line 10: Total Receipts \$50 and under* (not listed above)		0.00	
	RECEIPTS IN THE PERIOD	743.75	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)

To Whom Poid				
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
3 25 22	Happy Frog Inc E.B.	15 Central St E.BMO 2333	canpaign Lawn signs	515.20
4/1/22	Happy frog Inc	15 Central St E.BMA 62333	campaign Lawn signs	268.28
4/14/22	Happy frog Inc	(5 Central St F.B. MA 02393	canpaign Lawn	262.97
Line 12: Expenditures over \$50 (or listed above)			743.75	
Line 13: Expenditures \$50 and under* (not listed above)			0.00	
	Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD 743			
If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized				

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.









ACCOUNT ACTIVITY

Date of Transaction	Merchant Name or Transaction Description	\$ Amount				
PAYMENTS AND	PAYMENTS AND OTHER CREDITS					
03/15	& Payment Thank You Bill Pay Service	-332.00				
PURCHASE						
03/25	THE HAPPY FROG COPY CENT EAST BRIDGEWA MA	212.50				
04/01	THE HAPPY FROG COPY CENT EAST BRIDGEWA MA	268.28				

2022 Totals Year-to-Date	
Total fees charged in 2022	\$0.00
Total interest charged in 2022	\$0.00

Year-to-date totals do not reflect any fee or interest refunds you may have received.

INTEREST CHARGES

Your Annual Percentage Rate (APR) is the annual interest rate on your account.

Balance Type	Annual Percentage Rate (APR)	Balance Subject To Interest Rate	Interest Charges
PURCHASES	~ - * * * * * * * * * * * * * * * * * *		
Purchases CASH ADVANCES	23.24%(v)(d)	-0-	-0-
Cash Advances BALANCE TRANSFERS	25.24%(v)(d)	. 0 -	- 0 -
Balance Transfer	23.24%(v)(d)	- 0 -	-0-
			31 Days in Billing Period

(v) = Variable Rate (d) = Daily Balance Method (including new transactions)

(a) = Average Daily Balance Method (including new transactions)

Please see Information About Your Account section for the Calculation of Balance Subject to Interest Rate, Annual Renewal Notice,
How to Avoid Interest on Purchases, and other important information, as applicable.

IMPORTANT NEWS

Get 5% cash back on up to \$1,500 in combined purchases in this quarter's bonus categories from 4/1/22-6/30/22.

Learn more & activate at chase.com/freedom or call 1-800-524-3880 by June 14, 2022.

EDWARD J FIDLER 0000001 FIS33339 C 1

Page 2 of 2 Page 2 of 2

Statement Date: 04/08/22

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Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

REC'D EB TOWN CLERK 199 HOY 6 AN 10:11

	File with: City or Town Clerk or Election Commission			
Fill in Reporting Period dates: Beginning Date:	Ending Date: 5/6/27			
Type of Report: (Check one)				
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution			
Gordon McKinnon N/A				
School Candidate Full Name (if applicable) School Com Mr The C				
Office Sought and District 15 Mar Jan Dr. E. Bridgewater	Name of Committee Treasurer			
E-mail: AGUCKINNON77770guell.com	Committee Mailing Address E-mail:			
Phone # (optional): 588 -942 -8849	Phone # (optional):			
SUMMARY BALANC	E INFORMATION:			
Line 1: Ending Balance from previous report	*0			
Line 2: Total receipts this period (page 3, line 11)	# 557.81			
Line 3: Subtotal (line 1 plus line 2)	\$557.81			
Line 4: Total expenditures this period (page 5, line				
Line 5: Ending Balance (line 3 minus line 4)	#-0			
Line 6: Total in-kind contributions this period (page	ge 6) # D			
Line 7: Total (all) outstanding liabilities (page 7)	+D			
Line 8: Name of bank(s) used: Sax (a)	er			
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:(Treasurer's signature) Date:				
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 activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting				
Cardidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this Signed under the penalties of perjury:	in-kind contributions and liabilities for this reporting period and represents the			

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.)

report all receipts. Please include your committee name and a page number on each page.)						
	Name and Residential Address		Occupation & Employer			
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)			
4/15/22	Gordon McKrixnon	557.81	Retired			
Line 9: Total Receipts over \$50 (or listed above) 55-80						
Line 10: Total Receipts \$50 and under* (not listed above)						
Line 11: TOTAL RECEIPTS IN THE PERIOD 557.81			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.)

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	
4/15/22	Mayo Designs	100 East st. Weynouth ltd	SIGNS	537.81	
Line 12: Total Expenditures over \$50 (or listed above)			557.81		
Line 13: Total Expenditures \$50 and under* (not listed above)			0		
# TO 1	Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD * If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized				

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4