

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance
TOWN CLERK'S OFFICE

2017	File with: City or Town Clerk or Election Commission				
Fill in Reporting Period dates: Beginning Date:	Ending Date 0 3-20-17				
TOW	/N OF LUDITOW				
Type of Report: (Check one)					
8th day preceding preliminary 8th day preceding election 30 day	after election year-end report dissolution				
JAmes Chia Harry ten	Committee to reclet HAMIL				
Candidate Full Name (if applicable)	Committee Name				
School Committee					
Office Sought and District	Name of Committee Treasurer				
	Name of Committee Treasurer				
122 Overlow In Luston					
Residential Address	Committee Mailing Address				
Telephone Number (optional): 43 530-2709 Telephone	e Number (optional):				
SUMMARY BALANCE INFO	RMATION:				
Line 1: Ending Balance from previous report	7309.08				
Line 2: Total receipts this period (page 3, line 11)					
Line 2. Total receipts this period (page 3, line 11)	100-				
Line 3: Subtotal (line 1 plus line 2)	2409.08				
Line 4: Total expenditures this period (page 5, line 14)	2382.50				
Line 5: Ending Balance (line 3 minus line 4)	26.28				
Line 6: Total in-kind contributions this period (page 6)	0 -				
Line 7: Total (all) outstanding liabilities (page 7)					
Line 8: Name of bank(s) used: westful	Sonings Born				
Affidavit of Committee Treasurer:					
I certify that I have examined this report including attached schedules and it is, to the best of my knowl activity, including all contributions, loans, receipts, expenditures, disbursements, in kind contributions finance activity of all persons acting under the authority or on behalf of this committee in accordance w	and liabilities for this reporting period and represents the campaign				
Signed under the penalties of perjury:	(Treasurer's signature) Date: 7 _ 27 - 17				
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 k activity, of all persons acting under the authority or on behalf of this committee in accordance with incurred any liabilities nor made any expenditures on my behalf during this reporting period.	nowledge and belief, a true and complete statement of all campaign finance in the requirements of M.G.L. c. 55. I have not received any contributions,				
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 k finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions finance activity of all persons acting under the authority or on behalf of this committee in the contributions.	nowledge and belief, a true and complete statement of all campaign				
Signed under the penalties of perjury:	(Candidate's signature) Date: 7-2677				

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)	
1-1-17	Thomas Marieuli Agaman	100	LAwyer	
		:		
		77		

ine 9: Total Recei	ipts over \$50 (or listed above)			
Line 10: Total Rece	sipts \$50 and under* (not listed above)			
	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
			<u> </u>
		District the state of the state	
			Position
<u></u>			
ine 9: Total Recei	pts over \$50 (or listed above)		
	ipts \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD		- B
			Enter on page 1, line 2 include only those receipts not itemized above.

^{*} 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.)

Port all expenditures. Please include your committee name and a page number on each page.) To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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		Line 12: Total Expenditures ov	er \$50 (or listed above)	
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD				
	Enter on page 1, line $4 \rightarrow$	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

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	4 7 3	D	
Date Late	(aiphabetical fisting)	Address	Purpose of Expenditure	Amount
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	-			
<u></u>		Line 12: Expenditures over \$3	50 (or listed above)	
				<u> </u>
		Line 13: Expenditures \$50 and	under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	
Filou hour itim		er, include them in line 12. Line 13		<u> </u>

^{*} 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
				·
		Annual		
	****	Line 15: In-Kind Contributions	over \$50 (or listed above)	
	Line 16: In-Kind Contributions \$50 & under (not listed above)			
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				

^{*} 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.

Page 6

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
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	100 mm			

	4,			
	Enter on page 1 line 7 -	Line 18: TOTAL OUTSTAN	DÍNCH DADIT POUSS (ATTA)	