

Signed under the penalties of perjury:

# Form CPF M 102: Campaign Finance Report **Municipal Form**

RECEIVED

Office of Campaign and Political Finance

Commonwealth of Massachuset				REC	EIVED	Clark or Floo	tion Commission
70	1 0 10	vi.	18,0		Date: P 55		
I III III XCOP	TOWN OF LUDLOW	_		fuld tivi	14 12 3 36		
Type of R	eport: (Check one)			IOWN	OF LUDLOW		
		г	□ 30 day	after election	year-end repor	rt 🗸 di	ssolution
8th day	preceding preliminary 8th day preceding election	<u>_</u> _					
	Carlos Chaves		_ C.	ommi Hee	to Elect (	Carlos	J. Chave
	Candidate Full Name (if applicable)			1	-uis Dinis		
	Office Sought and District				ame of Committee Treasur	rer	
	5 Olivia Circle	1		`` _	Olivia C	CC 151-1	
	Residential Address	1			Committee Mailing Addres	SS	
E-mail:	chaves @ 81 @ hotmail. com		E-mail;	acco	cchaves 81 (	2 hotm	ail.com
	(//2 20. 220/	1	Phone # (c		413 - 221 - 3		
Phone # (optio	(mal): 113 - 221 - 173 B	-	I none # (c				
	SUMMARY BALANC	7	INFO	DMATION			7
	SUMMARY BALANG	LP	E HAPO.				
	Line 1: Ending Balance from previous report			4/,	245. <sup>38</sup>		
	Line 2: Total receipts this period (page 3, line 11	1)		# 0,00			
	Line 3: Subtotal (line 1 plus line 2)			\$ 1,24	15.38		
	Line 4: Total expenditures this period (page 5, li	ne	: 14)	# 1, 24	5,37		
	Line 5: Ending Balance (line 3 minus line 4)			* 0.00			
	Line 6: Total in-kind contributions this period (p	pag	ge 6)	\$ 0.00			
	Line 7: Total (all) outstanding liabilities (page 7	)		40.00			
	Line 8: Name of bank(s) used: TD		Ban	k			
	Line o: Ivalite of Dank(s) used.	_	241.				
I certify that I activity, inclu finance activi Signed under	Committee Treasurer: I have examined this report including attached schedules and it is, to the building all contributions, loans, receipts, expenditures, disbursements, in-king of all persons acting under the authority or on bonalf of this committee or the penalties of perjury:	nd co	contributions accordance	and liabilities for with the requirement	this reporting period and re	epresents the	paign finance campaign
FOR CAN	NDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1	box	x only)				
I certify activity, incurred	ate with Committee and no activity independent of the committee that I have examined this report including attached schedules and it is, to of all persons acting under the authority or on behalf of this committee in any liabilities nor made any expenditures on my behalf during this report	ing	cordance wi period.	th the requirements	ief, a true and complete sta s of M.G.L. c. 55. I have n	tement of all ot received a	campaign finance ny contributions,
Certify	ate without Committee QR Candidate with independent activity filing that I have examined this report including attached schedules and it is, to activity, including contributions, loans, receipts, expenditures, disbuscement finance activity of all persons acting under the authority or on behalf of	the	best of my	knowledge and bel atributions and liab	pilities for this reporting pe	riod and repr	campaign esents 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.) CEIVED

Date Received	Name and Residential Address (alphabetical listing required)	Amount	(for contributions of \$200 or more)
	TOWN OF LUDLOW		TOWN OF LUDLOW
	ceipts over \$50 (or listed above) ceipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD	40.00	← Enter on page 1, line 2

<sup>\*</sup> 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	10WN CLERK'S OFFICE 2018 MAY 21 A 9: 13		RECEIVED TOWN CLERK'S OFFICE
	TOWN OF LUDLOW		TOWN OF LUDLOW
	A /		
/			
Line 9: Total Rece	eipts over \$50 (or listed above)		
Line 10: Total Rec	eipts \$50 and under* (not listed above)		]
	RECEIPTS IN THE PERIOD	\$0.00	← Enter on page 1, line 2 uld include only those receipts not itemized above.

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### 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 value and a page number on each page. (1 EDK'S OFFICE

report all expenditures. Please include your committee name and a page number on each page )CI FRK'S OFFICE					
Date Paid	To Whom Paid (alphabetical lighting) MAY		Managar Managar Managar S 7	Amount	
3/15/12	Committee to TOWN OF Flect Carmina Fernan	LUDLOW,	Donatinop Sebernship Select person	# 80.00	
6/6/12	Committee to Elect John P. Da Cruz	Unknown	District Attorney Donation	#/00.00	
6/26/13	Donation for Retirement James McGowan	Un kenowa	Donation	# 100.00	
5/5/14	MS Fundraiser Dulce Strong	Un Known	Donation	#100.00	
Nov 2012 - March 2015	Bank Semice Fees	TD Bank	Sorvice Fee	\$ /6.00	
Mag 2018	Ludlow Portuguese School	33 Norwood S7 Ludlow, MA	Donation	# 449,38	
May 2018	Commonwealth of Massachusetti	Ashburton Place Boston, MA	Donation	# 400.00	
L		Line 12: Total Expenditures o	ver \$50 (or listed above)	\$1,245.38	
		Line 13: Total Expenditures \$5	0 and under* (not listed above)		
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	4/,245.38	

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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## SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Paid	TOWN CLERK'S OF	FILE	TOWN CLERK'S OF	HIC!
	2018 MAY 21 A		2018 MAY 14 P	\$ 57
	TOWN OF LUDLO		TOWN OF LUDL	SW.
		Line 12: Expenditures over \$5	50 (or listed above)	
		Line 13: Expenditures \$50 and	l under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	

<sup>\*</sup> 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 6 on page 1.

	TOWN CLERK'S OFFIGE		RECEIVED TOWN CLERK'S OFFICE	
Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	TOWN OF LUDLOW	3	TOWN OF LUDLOW	
-				
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	
	7	Line 16: In-Kind Contributions	s \$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND (	CONTRIBUTIONS	

<sup>\*</sup> 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.

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### 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.

<del></del>	RECEIVED TOWNGSWRKING DOFFICE		DECEIVED	Amount
Date Incurred		Address	REGGEIVED TOWN CLERK'S OFFICE	Amount
	2018 MAY 21 A 9 13		2018 HAY 14 P 3:5	٦
	TOWN OF LUDLOW		10WN OF LUDLOW	
			TOWN OF LODES	
				I L
C	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	