

# 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: 11004 Ending Date: 3 18 2024				
Type of Report: (Check one)				
8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution				
Candidate Full Name (if applicable)  Candidate Full Name (if applicable)  Committee Name  Committee Name  Committee Name  Committee Treasurer  Name of Committee Treasurer  AS TRIA DY LUGUN MA 21056  Committee Mailing Address  E-mail: Shall Cludw So of lavatock 2008 E-mail: Shall Cludw				
SUMMARY BALANCE INFORMATION:				
Line 1: Ending Balance from previous report  Line 2: **Total receipts this period (page 3, line 12)  **Total expenditures this period (page 5, line 15)  Line 4: **Total expenditures this period (page 5, line 15)  Line 5: **Ending Balance (line 3 minus line 4)  Line 6: **Ental in-kind contributions this period (page 6, line 18)  Line 7: Total (all) outstanding liabilities (page 7, line 19)  Line 8: Total out-of-pocket expenses this period (page 8, line 22)  Line 9: Name of bank(s) used:  **Park of Angula ** Durker Moute App.**				
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 of on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  Signed under the penalties of periory:  Candidate with 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 that are not otherwise disclosed in this report.  Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.  Signed under the penalties of perjury:  Candidate's signature)  Date:  Date:  3 18824				

#### SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule E Liabilities.

Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Date Received	Name and Residential Address eceived (alphabetical listing required)		Occupation & Employer (for contributions of \$200 or more)	
3111124	Benjamin Boyee 45 Fra Drive, Ludia	Amount 100 —	(tox contributions of \$200 of more)	
311194	marnie Bovee 45 Irla Drive, Ludias	100 -		
317/24	Christini Brown 13 1 Edgewar 2d, Wollas	50 -		
317184	Kevin Brown 131 Edgewood Rd, Luder	50 -		
3/15/24	Tohis St, Udles	100-		
3/15/24	Kelly kapnos 115 main St. Ludlow	100 -		
3/3/24	Elisa Kelliner 108 Wedglwood Dr., Ludles	150-		
313124	Michael Kelliter 108 wedgewood Dr., Ludw	150-		
314124	Pence + Peter Latendre 19 suntition lane, Ludia	50 —		
3/3/24	Than Lopes St, Ludia	50-	700 TO W	
3/3/24	Julianne Luig 297 Howard St., Ludha	50 -	WN CLERK MAR 21 TOWN OF	
312124	ALL MODEL 308 miner St, Unit 400 Ludland	50-	VED SOFFICE A 8: S	
3/11/24	Lettie McCollagn 91 Chapin Circly Ludia	15-	S m	

## SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3   3   24	Northen Therien + Swan Newton as Jewett Lane S. Hadley MA	50-	
1			
	Total		REC WHICLE TOWN
			EIVE EN S OFF DF LUDLO
774			DLOW S 59
	cipts over \$50 (or listed above)	\$1,065,00	* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not
	RECEIPTS IN THE PERIOD	\$1,0659	itemized above.  ← Enter on page 1, line 2

### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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			11	
	103			
		4		

## SCHEDULE B: EXPENDITURES (continued)

,	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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= 7			59 59	
1	5			
		1		
#TO 1 1 1 1 2 2 2 2				
and under, include them in line 13. Line 14		Line 13: Expenditures over \$50	(or listed above)	
		Line 14: Expenditures \$50 and t	inder (not listed above)	a
		Eme 14. Expellentiales \$50 and t	andor (not instead above)	
Enter on page 1, line 4 → Line 15: TOTAL EXPENDITURES IN THE PERIOD				

#### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

M.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a-page number on each additional page.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
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	100			
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	*			
* If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.		Line 16: In-Kind Contributions of	over \$50 (or listed above)	Ø
		Line 17: In-Kind Contributions S	550 and under (not listed above)	Ø
	Enter on page 1, line $6 \rightarrow$	Line 18: TOTAL IN-KIND COM	NTRIBUTIONS IN THE PERIOD	0

### SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and the outstanding balance, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
2/29/24	Sorah Bowlez for Good Sign Guys	5002 N. Howard Are. TOMPOL, PL 33603	Routeal yard syns (#100) it stakes	\$582.80
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B	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		TOWN CI	
			CEIN CLERK'S R 21 ) N OF LU	
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				7.
	Enter on page 1, line 7 → Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)			

#### SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

	Name and Address of Vendor		Power of Ferrary Mitaria	
Date Paid	(alphabetical listing required)	Amount	Purpose of Expenditure	
3/16/24	Deukin Donuts	\$78.46	Coffee + Drivits fiz Standart.	
2/29/24	Exil Sign Cuip 5002 N. Hourra Are. Tampa, PL. 33603	582.80	Ruhial yord Syns (# 100) W Stakes (10an)	
			TOWN	
			ETVE PRK'S O	
			EICE 8: 59	
nd,				
(or listed above) Line 21: Total Uniter	ed Out-Of-Pocket Expenditures Over \$50  mized Out-Of-Pocket Expenditures \$50 and	(00).26	* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.	
under (not listed above)  Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD  \$66-26			← Enter on page 1, line 8  Page 8	