

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

Office of Campaign and Political Finance

Commonwealth of Massachusetts	Filewith, City or Fown Clerk or Election Commission			
Fill in Reporting Period dates: Beginning Date:	61-2024 Ending Date: 12-31-2024  1025 JAN 13 P 2: 31			
Type of Report: (Check one)  ■ 8th day preceding preliminary ■ 8th day preceding election	■ 30 day after election			
Candidate Full Name (if applicable)  SCHOOL COMMITTEE  Office Sought and District  5 Z SCOTT ST. Luclow MA 01056  Residential Address	Committee To ELECT RONALD SALOID  Committee Name  LISA SALOID  Name of Committee Treasurer			
	52 SCOTT ST. Ludlow MA 61056 Committee Mailing Address			
E-mail: <u> </u>	E-mail: 1501010EST ELIZABETK LIDIOW ORG.  Phone #: 4/3 459 7435			
SUMMARY BALANC	E INFORMATION:			
Line 1: Ending Balance from previous report	68.11			
Line 2: Total receipts this period (page 3, line 12)	0			
Line 3: Subtotal (line 1 plus line 2)	68.11			
Line 4: Total expenditures this period (page 5, line 15)				
Line 5: Ending Balance (line 3 minus line 4)	68.11			
Line 6: Total in-kind contributions this period (page 6,	line 18) O			
Line 7: Total (all) outstanding liabilities (page 7, line 19)				
Line 8: Total out-of-pocket expenses this period (page 8	3, line 22)			
Line 9: Name of bank(s) used: Luso F	EDERAL CREDIT UNION			
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:  1 10 2025				
Candidate with Committee  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.  Date: 01-10-20-25				
Signed under the penalties of perjury: (Candidate's signature)				

## **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 D 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 (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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Office of Campaign and Political Finance

or massachusens	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	1(24 Ending Date: 12)31 a4
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	□ 30 day after election year-end report □ dissolution
T M 1 /	
Jettrey 4. LAINC	
Candidate Full Name (if applicable)	Committee Name
Office Sought and District	Name of Committee Treasurer
Residential Address	Committee Mailing Address
E-mail:	E-mail:
Phone #:	Phone # :
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 12)	<b>5.</b>
Line 3: Subtotal (line 1 plus line 2)	JAN C
Line 4: Total expenditures this period (page 5, line 15)	
Line 5: Ending Balance (line 3 minus line 4)	
Line 6: Total in-kind contributions this period (page 6,	line 18)
Line 7: Total (all) outstanding liabilities (page 7, line 1	9)
Line 8: Total out-of-pocket expenses this period (page	8, line 22)
Line 9: Name of bank(s) used:	
Diffe 7. Prairie of bank(s) used.	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Treasurer's signature)
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be	ox only)
	e best of my knowledge and belief, a true and complete statement of all campaign finance coordance with the requirements of M.G.L. c. 55. I have not received any contributions, g 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 finance activity, including contributions, loans, receipts, expenditures, disbursements ampaign finance activity of all persons acting under the authority or on behalf of the	s, in-kind contributions and liabilities for this reporting period and represents the is candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature)

M102 (12/2023)

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

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
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			NAN SEC
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