

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachuseus	File with: City or Town Clerk or Election Commission			
Fill in Reporting Period dates: Beginning Date: 3/8/	/2025 Ending Date: 4/13/2025			
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	☑ 30 day after election ☐ year-end report ☐ dissolution			
William Rosenblum Candidate Full Name (if applicable) Board of Selectman-Ludlow Office Sought and District 43 Green Street, Ludlow, MA 01056	Committee to Elect Bill Rosenblum Committee Name Kristen Rosenblum Name of Committee Treasurer 43 Green Street, Ludlow, MA 01056			
Residential Address E-mail: kbr1000@charter.net Phone #: 413-547-2717	Committee Mailing Address E-mail: kbr1000@charter.net Phone #: 413-547-2717			
SUMMARY BALANC	CE INFORMATION:			
Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 12)	3060.00			
Line 3: Subtotal (line 1 plus line 2)	3159.14			
Line 4: Total expenditures this period (page 5, line 15	3082.55			
Line 5: Ending Balance (line 3 minus line 4)	76.59			
Line 6: Total in-kind contributions this period (page 6 Line 7: Total (all) outstanding liabilities (page 7, line				
Line 8: Total out-of-pocket expenses this period (page	8, line 22) 0.00			
Line 9: Name of bank(s) used: LUSO Federal				
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: 4/20/2025				
	he best of my knowledge and belief, a true and complete statement of all campaign finance accordance with 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, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	its, in-kind contributions and liabilities for this reporting period and represents the his candidate in accordance with the requirements of M.G.L. c. 55.			
Signed under the penalties of perjury:	Date: 4/20/2025			

SCHEDULE A: RECEIPTS

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 tr. 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 I 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 ords of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions eived. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities. ach 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	<u> </u>	Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
3/12/2025	Baltazar, Dinis 540 Glendale Road, Wilb., MA 01095	500.00	Owner, Baltazar Construction
8/12/2025	Cerqueira, Helder 105 Stevens Street, Ludlow, MA 01056	100.00	
3/10/2025	Cincone, Dolly 177 Poole Street, Ludiow, MA 01056	100.00	
3/12/2025	Cuzzone, Mellissa 75 Fox Farm Rd., Feeding Hills, MA 01030	100.00	
3/12/2025	Czaplicki, Justine 7 Bungalow PT, Wilbraham, MA 01095	199.00	2025
3/12/2025	Dionne, Rob 21 Stivens Drive, Ludlow, MA 01056	50.00	APR 2 u
8/12/2025	Ellison, William 555 Miller Street, Ludlow, MA 01056	50.00	U
3/12/2025	Harrington, James 122 Overlook Drive, Ludlow, MA 01056	200.00	Program Director, Department of Correction
3/12/2025	Harrington, Joe 25 Crest Street, Ludlow, MA 01056	75.00	
8/12/2025	Hayes, Pamela 318 Colonial Dr., Ludlow, MA 01056	100.00	
3/12/2025	Leary, Martin and Brenna 10 George Street, Holyoke, MA 01040	50.00	
3/12/2025	Minie, Jeff and Mary 172 Prokop Avenue, Ludlow, MA 01056	100.00	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/12/2025	Morrison, John 77 Squier Street, Palmer, MA 01069	300.00	Owner, WEMOW, Inc.
8/12/2025	Pluta, Thomas 34 Barton Street, Granby, MA 01033	100.00	
3/12/2025	Puffer, Judy and Don 7 Blackberry Crescent Circle, Southwick, MA 01077	100.00	
3/12/2025	Roccanti, Bob 371 Westerly Circle, Ludlow, MA 01056	100.00	
8/12/2025	Rodrigues, Antonio 33 Oak Street, Ludlow, MA 01056	100.00	
8/12/2025	Rodrigues, Jeffrey 78 Karen Drive, Ludlow, MA 01056	500.00	Retired ex-liquor store owner, Pop N Kork
8/14/2025	Tatro, Steven 14 Fern Street, Ludlow, MA 01056	100.00	
			2025 AP
			2
			© 85
Line 10: Total Rec	eipts over \$50 (or listed above)	2924.00	* If you have itemized receipts of \$50 and under, include them in line 10. Line 11
Line 11: Total Rec	eipts \$50 and under (not listed above)	136.00	should include only those receipts not itemized above.
Line 12: TOTAL	RECEIPTS IN THE PERIOD	3060.00	← 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.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
3/25/2025	Get Set Marketing	P.O. Box 51063 Springfield, MA 01151	Campaign Mailer/Postcard	2310.01
3/18/2025	Launch and Stand Out	98 Lower Westfield Rd. Suite 120 Holyoke, MA 01040	Digital Billboard Truck	550.00
3/21/2025	Vanished Valley Brewing	782 Center Street Ludlow, MA 01056	Fundraiser/Food	222.54
			TOWN	
			7 T	
			© α.	

SCHEDULE B: EXPENDITURES (continued)

Date Paid (alphabetical listing) Address Purpose of Expenditure Amount	To Whom Paid				
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5	Date Paid		Address	Purpose of Expenditure	Amount
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					<u></u>
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5				2	
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082,5					
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5				2 2	
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5				700	
*If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5					
* If you have itemized expenditures of \$50 Line 13: Expenditures over \$50 (or listed above) 3082.5				1	
*If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 Line 13: Expenditures over \$50 (or listed above) 3082.5				() ()	
*If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 Line 13: Expenditures over \$50 (or listed above) 3082.5					
*If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 Line 13: Expenditures over \$50 (or listed above) 3082.5					
* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 Line 13: Expenditures over \$50 (or listed above) 3082.5					
* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 Line 13: Expenditures over \$50 (or listed above) 3082.5					
* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 Line 13: Expenditures over \$50 (or listed above) 3082.5					
* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 Line 13: Expenditures over \$50 (or listed above) 3082.5					
* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 Line 13: Expenditures over \$50 (or listed above) 3082.5					
* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 Line 13: Expenditures over \$50 (or listed above) 3082.5					
* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 Line 13: Expenditures over \$50 (or listed above) 3082.5					
* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 Line 13: Expenditures over \$50 (or listed above) 3082.5					
* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 Line 13: Expenditures over \$50 (or listed above) 3082.5					
* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 Line 13: Expenditures over \$50 (or listed above) 3082.5					
* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14					
and under, meduce them in the 15. Direct i	and under, include them in line 13. Line 14 should include only those expenditures not		Line 13: Expenditures over \$50 (or listed above)		3082.55
should include only those expenditures not itemized above. Line 14: Expenditures \$50 and under (not listed above)			Line 14: Expenditures \$50 and under (not listed above)		0.00
	3082.55				

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

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 dition, 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 d 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 cords of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions seived. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all receipts. Please

lude the candidate or committee name and a-page number on each additional page.				
Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			7025	
			8 B C	
			<u>-</u>	
			$\overline{\omega}$	
				:
* If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not		Line 16: In-Kind Contributions over \$50 (or listed above)		
		Line 17: In-Kind Contributions \$50 and under (not listed above)		
should inclu	itemized above.	Line 17: In-King Contributions \$5	o and under (not insted above)	

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
			10 MH 0	
			1 7 4	
			w co	
			0 0	
	B	Line 19: TOTAL OUTSTAN	DINC LIADITITIES (ATT)	

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.

D.4. D.13	Name and Address of Vendor	A	n cr
Date Paid	(alphabetical listing required)	Amount	Purpose of Expenditure
			F-3 - '
			7025 AP
			24
			(T) CO
- Language Control of the Control of			
Line 20: Total Itemiz (or listed above)	ed Out-Of-Pocket Expenditures Over \$50		* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21
	nized Out-Of-Pocket Expenditures \$50 and ve)		should include only those expenditures not itemized above.
	OF-POCKET EXPENDITURES IN THE PERIOD		← Enter on page 1, line 8 Page 8