

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts RECEIVED TOWN CLERK'S OFFICE	
Fill in Reporting Period dates: Beginning Date: 119 DEC 26 A 11: 50	File with: City or Town Clerk or Election Commission 1/2019 Ending Date: /2/31/2019
Type of Report: (Check one) TOWN OF LUDLOW	
☐ 8th day preceding preliminary ☐ 8th day preceding election	30 day after election
ANTONIO ROSA Candidate Full Name (if applicable)	COMMITTEE TO ELECT ANTONIO ROSA
B.O.A.	Jose A Terro
135 Ray ST, LuoLow, MA 01056 Residential Address	135 Ray ST, LUD COW, MA USS
E-mail: TONIROSA & NEAPPRAISALS. COM	E-mail: Committee Mailing Address
Phone # (optional): 4/3/573 - 6565	Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	100 ès
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	/00 °°
Line 4: Total expenditures this period (page 5, lin	e 14)
Line 5: Ending Balance (line 3 minus line 4)	/Ou po
Line 6: Total in-kind contributions this period (pa	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Jua - Jua
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 a finance activity of all persons acting under the authority or on behalf of this equinities in	Contributions and liabilities for this reporting period and represents the companion
Signed under the penalties of perjury:	(Treasurer's signature) Date: 1/1/2020
FOR CANDIDATE FILINGS ONLY: Affidavit of Cundidate: (check I bo	x only)
Candidate with Committee Tecrify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in acting under the authority or on by behalf during this reporting	
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 campaign finance activity of all persons acting under the authority or on behalf of this	in-kind contributions and liabilities for this convering period and consecute the
Signed under the penaltics of perjury:	(Condidate's signature) Date: 1/1/2020

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 manie and fall of rumber on each page.)

Date Received	lease include your committee pance (in fally) Name and Residential Wild Edskirk S (alphabetical listing required)	Amount		
	TOWN OF L	1		
	,			
.0.44				
Line 9: Total Rec	eipts over \$50 (or listed above)			
Line 10: Total Re	ceipts \$50 and under* (not listed above)			
	RECEIPTS IN THE PERIOD		☐ Enter on page 1, line 2	

SCHEDULE A: RECEIPTS (continued)

Name and Posidor fold Address						
Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)			
	REC TOWN CL	EIVED RK'S OFFICE				
	ZOI 9 DEC	6. A.II: 50				
		- 100 OW				
Line 9: Total Receipt	ts over \$50 (or listed above)					
ine 10: Total Receip	ets \$50 and under* (not listed above)					
ine 11: TOTAL RE	ECEIPTS IN THE PERIOD		Enter on page 1, line 2			

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

	To Whom Paid	ittee name and a page-number on TOWN CLERK'S	FFFF Erpose of Expenditure	Amount
Date Paid	(alphabetical listing)			
		2019 OEC 2ь A	(II: 50	
		TOWN OF LUD	DWW	
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	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Line 12: Total Expenditures of	wer \$50 (or listed above)	
Tarana a tat ati				
1	Line 13: Total Expenditures \$50 and under* (not listed above)			
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	

^{*} If you have itemized expenditures of S50 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
		RECEIVED TOWN CLERK'S OFFICE		
		2019 DEC 26 A 11: 5		
		TOWN OF LUDLOW		
		Line 12: Expenditures over \$50 (c	or listed above)	
		Line 13: Expenditures \$50 and unc	der* (not listed above)	
		Line 14: TOTAL EXPENDITUE	- 4	110101111111111111111111111111111111111

^{*} 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*		Description of Contribution	Value
		2019 DEC 26 A II:	51	
		TOWN-OF LUDI OW		
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r The Halland His	ele di Aliabat democratica de la constanta de	Line 15: In-Kind Contributions over \$50 (or listed above)		
· · :			s \$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.

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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.

Date Incurred	To Whom Due	Address	Purpose	Amount
		Address RECEIN TOWN CLERK'S	OFFICE	
		7019 DEC 25	-H: 51	
		TOWN OF LU	low	
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	· · · · · · · · · · · · · · · · · · ·		11	
<u></u>				
	Enter on nage 1 line 7 -	Line 18: TOTAL OUTSTAND	INC I IABIT ITTES (ATT)	