

# Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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Please print or type all information, except signatures.	2/31/2020 (AIMIDDIYYYY)		1 20th day of January (Year-End report)	nant to M.G.L. Chapter 55: 1. I certify that I am a candidate for or currently hold Municipal Office. 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence. 3. I certify that I do not have a political committee.	OFFICE SOUGHT	Library (Fustee	
Pleas	2/	\   ``		iod, and c	SSS	ارد	
	Ending:		30th day following election (town or special)	gations during this reporting peri	RESIDENTIAL ADDRESS (Street and Number)	297 Colonial Drive	
			30th day follow	s, or incurred any oblig	Signed under the penalties of perjury	Collecte	
	20 (MM/DD/YYYY)		☐ 8th day preceding election	funicipal Office. 1ade any expenditur	SIGN Signed under the	Linda	<u>                                     </u>
dlow	. 1.20		Stlı day ı	urrently hold Nontributions, n	ш	ollette	
Luc	Beginning:	heck One)	8th day preceding preliminary/primary	uant to M.G.L. Chapter 55:  1. I certify that I am a candidate for or currently hold Municipal Office.  2. I certify that I have not received any contributions, made any expend  3. I certify that I do not have a political committee.	PRINT NAME	Linda J. Col	
Sity or Town of:	keporting Period:	ype of Report: (Check One)	☐ 8th day preced	ursuant to M.G.L. Chapter 55: 1. I certify that I am a cand 2. I certify that I have not re 3. I certify that I do not hav	DATE	1.6.2	



# 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:	. 2020 Ending Date: 12.31.20
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution
Linda J. Collette  Candidate Full Name (if applicable)  Library Trustee  Office Sought and District  297 Olonial Dr., Ludlow  Residential Address  E-mail: Yedcar & Charter. net  Phone # (optional): 413. 583-4383	Committee Name  Name of Committee Treasurer  Committee Mailing Address  E-mail:  Phone # (optional):
SUMMARY BALANCI	E INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, line  Line 5: Ending Balance (line 3 minus line 4)	14) \( \text{S} \text{ \text{S}} \text{ \text{S}} \( \text{S} \text{ \text{S}} \)
Line 6: Total in-kind contributions this period (pag	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name 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 o activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind co finance activity of all persons acting under the authority or on behalf of this committee in acting under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box Candidate with Committee	ontributions and liabilities for this reporting period and represents the campaign ecordance with the requirements of M.G.L. e. 55.  (Treasurer's signature)  Date:
I certify that I have examined this report including attached schedules and it is, to the b activity, of all persons acting under the authority or on behalf of this committee in accommuned any liabilities nor made any expenditures on my behalf during this reporting p	ordance 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 b finance activity, including contributions, loans, receipts, expenditures, disbursements, i campaign finance activity of all persons acting under the authority or on behalf of this campaign finance activity of all persons acting under the authority or on behalf of this campaign finance activity of all persons acting under the authority or on behalf of this campaign finance activity of all persons acting under the authority or on behalf of this campaign finance activity of all persons acting under the authority or on behalf of this campaign finance activity of all persons acting under the authority or on behalf of this campaign finance activity of all persons acting under the authority or on behalf of this campaign.	in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date: 1.5.2021

### 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.)

report all receipts. P	lease include your committee name and a pa	ige number on ea		
	Name and Residential Address	Occupation & Employer		
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
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Line 9: Total Rece	ipts over \$50 (or listed above)			
Line 10: Total Rece	eipts \$50 and under* (not listed above)			
	<u> </u>		<u>3</u>	
Line 11: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2	
<del></del>	A		ild include only those receipts not itemized shove	

<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)

Data Dassins 3	Name and Residential Address	<b>A</b>	Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
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Line 9: Total Rece	ipts over \$50 (or listed above)		
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11. TOTAL	RECEIPTS IN THE PERIOD		1
		0 I i a 10 a	Enter on page 1, line 2  Id include only those receipts not itemized above.

<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 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

eport all expenditures. Please include your committee name and a page number on each page.)						
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount		
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		Line 12: Total Expenditures ov	er \$50 (or listed above)			
		Line 13: Total Expenditures \$50	0 and under* (not listed above)			
	Enter on page 1 line A →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD			
	Enter on page 1, line 4  Line 14: TOTAL EXPENDITURES IN THE PERIOD  Line 14: TOTAL EXPENDITURES 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.

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### SCHEDULE B: EXPENDITURES (continued)

To Whom Paid							
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount			
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		Line 12: Expenditures over \$50	(or listed above)				
		Line 13: Expenditures \$50 and	under* (not listed above)				
			<del>.</del>				
	Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD						
( ).	you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized						

<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 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
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	TO NEW YOUR PROPERTY OF THE PR			
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	

<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.

Date Incurred	To Whom Due	Address	Purpose	Amount
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