

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

Office of Campaign and Political Finance

RECEIV	/FD	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 1	2505	O Ending Date: 3/5/2020
Type of Report: (Check one)	D 7: U	
38th day preceding preliminary 8th day preceding election	30 day	after election year-end report dissolution
Thomas Haluch		NIA
Candidate Full Name (if applicable) Board of Public Works		Committee Name
Office Sought and District 169 munsing 5+.		Name of Committee Treasurer
3-mail: hauchwater@yahoo.com	E-mail:	Committee Mailing Address
Phone # (optional): 4135891815	Phone # (c	ptional):
SUMMARY BALANC	E INFO	RMATION:
Line 1: Ending Balance from previous report		0
Line 2: Total receipts this period (page 3, line 11)		0
Line 3: Subtotal (line 1 plus line 2)		0
Line 4: Total expenditures this period (page 5, line	14)	<u>O</u> .
Line 5: Ending Balance (line 3 minus line 4)		0
Line 6: Total in-kind contributions this period (page	ge 6)	
Line 7: Total (all) outstanding liabilities (page 7)		0
Line 8: Name of bank(s) used:	_	
effidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best of ctivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of inance activity of all persons acting under the authority or on behalf of this committee in a signed under the penalties of perjury:	ontributions a	and liabilities for this reporting period and represents the campaign
OR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	only)	
Candidate with Committee I certify 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 accincurred any liabilities nor made any expenditures on my behalf during this reporting	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 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 contr	ibutions and liabilities for this reporting period and represents the
igned under the penaltics of perjury: Manna Walle	ch	(Candidate's signature) Date: 13/16/5070

(Candidate's signature)

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
			2020 MAR 16 P 2: 41
			TOWN OF LUDLOW
			29
Line 9: Total Rece	eipts over \$50 (or listed above)		
Line 10: Total Rec	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD	0	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
	-		RECEIVED TOWN OLERK'S OFFICE
			2020 MAR 16 P 2: 42
			I OWN OF LUDLOW
		·	
ine 9: Total Recei	pts over \$50 (or listed above)		
ine 10: Total Rece	ipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD	6	Enter on page 1, line 2
If you have itemized	receipts of \$50 and under, include them in line	9. Line 10 shoul	d 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	farth frage at the same	2020 MAR 16 ₱ 2: 42	72. 00
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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.1	İ		- اا	
		1		
1				
		111		
			111	
			111	
		J		
		Line 12: Total Expenditure	s over \$50 (or listed above)	
		r : 12. T-4-1 D C-	050 1 4 (4 1' 1 - 1 - 1 - 1 - 1	<u> </u>
		Line 13: Total Expenditures	s \$50 and under* (not listed above)	
		Line 14: TOTAL EXPEN	DAMAIDAG AT MAKE DEDIOD	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
			DECEMEN	
			PECEIVED OWN CLERK'S OFFICE	
			7070 MAR 16 P 2: 42	
			TOWN OF LUDLOW	
		Line 12: Expenditures over	\$50 (or listed above)	
	C & & 0	Line 13: Expenditures \$50 ar	nd under* (not listed above)	
	Enter on page 1 line 4 ->	Line 14: TOTAL EXPEND	ITTIDES IN THE DEDIOD	

If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized bove.

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. RECEIVED

		TOWN CLERK'S OFFICE			
Date Received	From Whom Received*	Residential Address 202	Description of Contribution	Value	
	=	-	OWN OF LUDLOW		
		2			
	[Line 15: In-Kind Contributions	over \$50 (or listed shove)		
		Line 16: In-Kind Contributions			
	Enter on page 1, line 6 \rightarrow	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	0	

^{*} 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.

Page 6

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 s those liabilities incurred during this reporting period.

ate Incurred	To Whom Due	Address	Purpose	Amount
4 1		TOV	ECEIVED IN CLERK'S OFFICE	
		2020	MAR TO P 2: 42 WN OF LUDLOW	

J 1				