

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth CMassachusetts	RECEIVED
'ill in Reporting Period dates: Beginning Date: 3/6/2	2020 Ending Date: 5/14/2-02-0
ype of Report: (Check one)	10WN OF LUDLOW
☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 3	0 day after election year-end report dissolution
THOMAS HALUCH Candidate Full Name (if applicable) BORRO OF PUBLIC MORKS Office Sought and District IGG MUNSING STRUET Residential Address i-mail: HALUCHWATER Q YAHOO. COM.	Committee Name Name of Committee Treasurer Committee Mailing Address
11:	one # (optional):
SUMMARY BALANCE IN	NFORMATION:
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)	1147,50
Line 5: Ending Balance (line 3 minus line 4)	1147.50
Line 6: Total in-kind contributions this period (page 6)) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: /V/A	
Affidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best of my activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions activity of all persons acting under the authority or on behalf of this committee in according under the penalties of periusus.	outions and liabilities for this reporting period and represents the campaign dance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: N/M	(Tressurers signature)
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the best of activity, of all persons acting under the authority or on behalf of this committee in accordan incurred any liabilities nor made any expenditures on my behalf during this reporting period.	of my knowledge and belief, a true and complete statement of all campaign finance ace 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 best of finance activity, including contributions, loans, receipts, expenditures, disbursements, in-king campaign finance activity of all persons acting under the authority or on behalf of this cand	

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

eport all receipts. Pl	ease include your committee name and a pa	ge number on e	ach page)
Date Received	Name and Residential Address (alphabetical listing required)	Amount	TOWN CONTRIBUTION & Employer (for contributions of \$200 or more)
			2020 HAY 20 A II: 32
			10wn or 1 m
		<u> </u>	TOWN OF LUGLON
			H
] [*]
		[
]
		<u> </u>]
		<u> </u>	<u> </u>
			<u> </u>
		li I	
		<u> </u>	
<u></u>			
Line 9: Total Recei	pts over \$50 (or listed above)]
Line 10: Total Rece	ipts \$50 and under* (not listed above)		1
4	RECEIPTS IN THE PERIOD	<u></u>	☐ Enter on page 1, line 2 Ild include only those receipts not itemized above.

^{*} 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	<u> </u>	Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
	[
			RECEIVED
_			TOWN STATE
			2020 MAY 20 A 11: 32
			10WK OF EUDLOW
]	
į			
		<u> </u>	
i i			
		<u> </u>	
i			
ij			
·	į		
		!	
		<u> </u>	
ll l			
: 0. m-1-1 n - :			
me 9: 10tal Kecel	pts over \$50 (or listed above)		
ine 10: Total Rece	ipts \$50 and under* (not listed above)		
ine 11: TOTAL R	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 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

report 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	
3/13/20	ROBKETS & WOLOW PRINTING	1791 BOSTON ROND SPRINGHELD, MAY 01129	LAWN SIGNS	759.69	
3/17/20	ROBLETS 9 LUDLEN PRINTING	1791 BOSTON ROAD SPRINGHELOMA 01129	LAWN SIGNS	387.81	
	. 32 4				
	E 1VE 20 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	TOWH OF 1				
Line 12: Total Expenditures over \$50 (or listed above)					
Line 13: Total Expenditures \$50 and under* (not listed above)					
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD # If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized					

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 above.

SCHEDULE B: EXPENDITURES (continued)

Determin	To Whom Paid	DEB D. EALEADIT ORES (C	· · · · · · · · · · · · · · · · · · ·	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
			DECENS.	
			RECEIVED	
			2020 HAY 20 A 11: 32	1
		1		<u> </u>
				[;
		<u> </u>		
 .				
			<u> </u>	
	Line 12: Expenditures over \$50 (or listed above)			
		Line 13: Expenditures \$50 and under* (not listed above)		
		Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	<u></u>

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

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	
Date Received	From Whom Received*	Residential Address 10	Description of Contribution	Valu <u>e</u>
		201	MAY 20 A II: 32	
			OWN OF LUDLOW	
	:			
1				
		Line 15: In-Kind Contributions 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 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.

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 as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	RECEIVED	Amount
			ZOZO MAY 20 A II: 32	
			TOMK OF FOOFOM	
				· · · · · · · · · · · · · · · · · · ·
-				
	· .			