

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts RECEIVEU	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 2071 JAN -11 A 11:40	1/2020 Ending Date: /2/3//2020
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) B.O.A.	Committee TO Elect ANTONIO ROSA
B.O.A.	Use A Tereso
Office Sought and District 135 RAY ST, LUDLOW, MA OLISTO Residential Address E-mail: TONY, RR @ CHARTER. NET	135 RAT ST, LUDLOW, MA 01056
E-mail: TONY, RR @ CHARTER. NET	Committee Mailing Address E-mail:
Phone # (optional): 413/573-6565	Phone # (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	100.0
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	100:
Line 4: Total expenditures this period (page 5, lin	·
Line 5: Ending Balance (line 3 minus line 4)	/00;
Line 6: Total in-kind contributions this period (pa	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: TD BAN	
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 of finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	x only)
incurred any liabilities nor made any expenditures on my 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 both alf of this	s, in-kind contributions and liabilities for this reporting period and represents the is candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature) Date: /2/31/2025

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 complete, 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)
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
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	TOWN OF LUDLOW		- E-E-E-E
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ine 9: Total Recei	pts over \$50 (or listed above)		
me 7. Total Recel	pis over 450 (or nated above)		
ine 10: Total Rece	ipts \$50 and under* (not listed 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	A.m.c4	Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
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		1	- > ZOZI JAN -4- A II: II:	
			TOWN OF EUDEOW	
Line 9: Total Recei	pts over \$50 (or listed above)			
Line 10: Total Rece	ipts \$50 and under* (not listed above)			
	RECEIPTS 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

eport all expend	itures. Please include your comm	ittee name and a page number on	each page.)	
Date Paid	To Whom Bard K'S OFF	ICE Address	Purpose of Expenditure	Amount
	2021 JAN -LI · A II	11.		
	TOWN OF LUDLO	,		
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		1		
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES 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 above. Page 4

SCHEDULE B: EXPENDITURES (continued)

To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
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			RECEIVED TOWN OF FIRE		
L			TOWN OF FRK'S OFFICE		
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	1	i]	2021 JAN -4 A 11: 1] <i>*</i>	
	<u></u>		TOWN OF LUDLOW		
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		Line 12: Expenditures over \$50) (or listed above)		
			(or fished doore)		
Line 13: 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 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.

	RECEIVED	<u>. </u>		
Date Received	RECEIVED TOWN CLERK'S OFFICE From Whom Received*	Residential Address	Description of Contribution	Value
	2021 JAN -14 A II: 11			
	TOWN OF LUDLOW			
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				1
<u> </u>				
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions	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	RECEIVED	Amount
			RECEIVED TOWN-CLERK'S OFFICE	
			2021 JAN -4 A 11: 1	
			TOWN OF LUDLOW	
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