

Form CPF M 102: Campaign Finance Report Municipal Form

RECEIVED TOWN CLERK'S OFFICE Office of Campaign and Political Finance

Fill in Reporting Herroll dates. A & Beginning Date: 01/01	File with: City or Town Clerk or Election Commission //2021 Ending Date: 12/31/2021
TOWN OF LUDLOW	
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election 🔀 year-end report 🔲 dissolution
Candidate Full Name (if applicable)	Committee to Elect Kim M. Batista
Town Clerk	Committee Name Parmela Fleming
Office Sought and District	Name of Committee Treasurer
12 Valley View Dr, Ludlow, MA 01056	86 Kelly Rd, Chicopee, MA 01022
Residential Address	Committee Mailing Address
E-mail: kim.batista729@yahoo.com	E-mail:paman926@gmail.com
Phone # (optional): 413-589-7631	Phone # (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	115.51
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	115.51
Line 4: Total expenditures this period (page 5, line	
Line 5: Ending Balance (line 3 minus line 4)	70.51
Line 6: Total in-kind contributions this period (page	ge 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: Country Bank	
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 a Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box 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 activity, of all persons acting under the authority or on 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,	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 112/22 x only) best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period that are not otherwise disclosed in this report. best of my knowledge and belief, a true and complete statement of all campaign
campaign finance activity of all persons acting under the authority or on behalf of this Signed under the penalties of perjury:	(Candidate's signature) Candidate's signature Can

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 550 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.) 1022 1441 13

Date Received	Name and Residential Address (alphabetical listing required)	Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
ine 9: Total Recei	pts over \$50 (or listed above)	0	
Line 10: Total Receipts \$50 and under* (not listed above)			
ine 11: TOTAL R	ECEIPTS 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 (for contributions of \$200 or more)
		—————————————————————————————————————	(for contributions of \$200 or more) RECEIVED TOWN CLERK'S OFFICE
			7027 JAN 13 A 8: 47
			TOWN OF LUDLOW
ine 9: Total Receip	ets over \$50 (or listed above)	0	
ine 10: Total Receip	pts \$50 and under* (not listed above)	0	
ine 11: TOTAL R	ECEIPTS 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 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.)

	To Whom Paid	page number of		
Date Paid	(alphabetical listing)	Address	Purpose of EARland Ware 3	A Andunt
			TOWN OF L	IN OW
			10000	plow
				**
	3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		As president the minimum of an array to the same and a state of a second and a second as a second and the secon	
				and the second s
			The Date is not in the improved them are supplied in the first of the Lot of the supplied in the last	
1				
		Line 12: Total Expenditures over	er \$50 (or listed above)	
		Line 13: Total Expenditures \$50		45
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	45

^{*} 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
		**Service of the State of the service of the servic	TOWN CLE	K'S OFFICE
			1	A 8: 47
			TOWN OF	HUDLOW
			** #8	
		Line 12: Expenditures over \$50	(or listed above)	0
		Line 13: Expenditures \$50 and	under* (not listed above)	
	market and a second			
		Line 14: TOTAL EXPENDIT		45

^{*} 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.

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		T .	10WN CLERK'S OFFIC	E
Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			TOWN OF LUDLOW	
		Line 15: In-Kind Contributions	over \$50 (or listed above)	0
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	0
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	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 as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address T	RECEIVED WH CLERP G TO F F G C E	Amount
			12 JAN 13 A 8: 47	
			TOWN OF LUDLOW	
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	0