

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Re	porting Period dates: Beginning Date: 3/11,	/22 Ending Date: 4/28/22
7.	Report: (Check one) preceding preliminary	⊠ 30 day after election
Joshua Ca	rpenter Candidate Full Name (if applicable)	Carpenter for Ludlow Committee Name
Planning B		Benjamin Gagne
	Office Sought and District	Name of Committee Treasurer
37 Paul Av	Residential Address	37 Paul Ave Committee Mailing Address
E-mail;	Josh@meadowfarms.com	E-mail: Josh@meadowfarms.com
Phone # (opti		Phone # (optional):
[SUMMARY BALANC	E INFORMATION:
	Line 1: Ending Balance from previous report	77.31
	Line 2: Total receipts this period (page 3, line 11	100.00
į	Line 3: Subtotal (line 1 plus line 2)	夏.31
:	Line 4: Total expenditures this period (page 5, lin	ne 14)
	Line 5: Ending Balance (line 3 minus line 4)	177.31
	Line 6: Total in-kind contributions this period (p	
	Line 7: Total (all) outstanding liabilities (page 7)	0
	Line 8: Name of bank(s) used: Luso Federal Credit	Union
I certify that activity, including finance activity. Signed under FOR CAN Candida I certify activity, incurred Candida I certify activity.	nding all contributions, loans, receipts, expenditures, disbursements, in-kindity of all persons acting under the authority or on behalf of this committee in the penalties of perjury: Solution Solution	(Treasurer's signature) Date: 5///22 Description of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ag period that are not otherwise disclosed in this report. The best of my knowledge and belief, a true and complete statement of all campaign
campaig	gn finance activity of all persons acting under the authority or on behalf	ts, in-kind contributions and liabilities for this reporting period and represents the his candidate in accordance with the requirements of M.G.L. c. 55. Date: 4/27/22
pigned unde	er the penaltics of perjury:	(Alluminates a selluments)

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)
3/11/22	Winred Arlington Virgina	\$100	
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Line 9: Total Rec	cipts over \$50 (or listed above)	\$100.00	
Line 10: Total Red	ceipts \$50 and under* (not listed above)	<u></u>	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	\$100,00	- Enter on page 1, line 2

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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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		← Enter on page 1, line 2
		- O. Tina 10 show	dd 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 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.)

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	ver 500 (or listed above)	<u></u>	
Line 13: Total Expenditures \$50 and under* (not listed above)					
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD					
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.

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SCHEDULE B: EXPENDITURES (continued)

Data Baid	To Whom Paid	Address	Purpose of Expenditure	Amount
Date Paid	(alphabetical listing)	Address	Ful pose of Expenditure	Allount
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		Line 12: Expenditures ove	er \$50 (or listed above)	
		······································	and under* (not listed above)	
		· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>
	Enter on page 1, line 4 → mized expenditures of \$50 and unde	Line 14: TOTAL EXPEN	DITURES 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 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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 		Line 15: In-Kind Contribution	ons over \$50 (or listed above)	
		Line 16: In-Kind Contribution	ons \$50 & under (not listed above)	
		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	Purpose	Amount
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l.	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	