

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date:	Ending Date:		
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution		
bin day preceding preminitary			
JOSEPH QUEIROGA			
Candidate Púll Name (if applicable)	Committee Name		
Office Sought and District	Name of Committee Treasurer		
308 Miller ST. UNIT 55-01056	NA		
Residential Address	Committee Mailing Address		
Email: 10 greenegati gwail. Con-	F-mail:		
Phone #(optional): 4/3 - JS83 - 85 70 210 - 3777	Phone#(optional):		
SUMMARY BALANCE INFORMATION:			
Line 1: Ending Balance from previous report			
Line 2: Total receipts this period (page 3, line 11)			
Line 3: Subtotal (line 1 plus line 2)			
Line 4: Total expenditures this period (page 5, line 14)			
Line 5: Ending Balance (line 3 minus line 4)			
Line 6: Total in-kind contributions this period (page 6)			
Line 7: Total (all) outstanding liabilities (page 7)			
Line 8: Name of bank(s) used:	n/H		
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:	ontributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.		
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	x 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	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,		
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all personsfacting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.			
Signed under the penalties of perjury: Date: 3/10/22			

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.)

	Name and Residential Address		Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
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ine 9: Total Rece	ipts over \$50 (or listed above)			
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ine 10: Total Rece	eipts \$50 and under* (not listed above)			
ing 11. TOTAL	DECEIDTS IN THE DEDION			
ine 11; TOTAL i	RECEIPTS IN THE PERIOD	<u></u>	← 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.