

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 1/1/2022 Ending Date: 3/10/2022
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding preliminary ☐ 30 day after election ☐ year-end report ☐ dissolution
WILLIAM PETER ROSENBUM Candidate Full Name (if applicable) LUDLOW BOARD OF SELECTMEN Office Sought and District 43 GNEEN ST., LUDLOW, MY 01054 Residential Address E-mail: KBR 1000 & CHARTER. NET Phone # (optional): COMMITTEE TO ELECT BILL ROSENBUM Committee Name KUSTEN ROSENBUM Name of Committee Treasurer 43 GNEEN ST., LUDLOW, MY 01054 Committee Mailing Address E-mail: KBR 1000 & CHARTER. NET 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:
Affidavit of Committee Treasurer: 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 all contributions, loans, receipts, expenditures, disburgements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf offthis committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: [Treasurer's signature] [Treasurer's signature] [Treasurer's signature]
Candidate with Committee Candidate with Committee Candidate with Commi
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 persons acting 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: (Candidate's signature)

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)	
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ne 9: Total Rece	sipts over \$50 (or listed above)			
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ne io: Lotat Kec	eipts \$50 and under* (not listed above)	<u> </u>		

^{*} 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)
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			24 24
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
Line 11: TOTAL I	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 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.) To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
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		I in a 10. Total France ditamen	or \$50 (or listed shows)		
Line 12: Total Expenditures over \$50 (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					

^{*} 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)

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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	Unterstants were the covered and of the first of the content were contented and understand and understand an according to	Line 12: Expenditures over \$5	0 (or listed above)	<u> </u>
Line 13: Expenditures \$50 and under* (not listed above)				
	F			
	Enter on page 1, line 4 →		should include only those expenditure	

^{*} 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 Contributions	s 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.

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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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Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				