

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates:	Beginning Date:	Ending	File with: City or Town Cler Date;	k or Election Commission
Type of Report: (Check one)				
8th day preceding preliminary	8th day preceding election	30 day after election	year-end report	dissolution
Joel Domingo		N	O COMMITTEE	
Candidate Full Nam			Committee Name	
Planning Office Sought a		N	ame of Committee Treasurer	.
230 Sewall St Lu			ame of Committee Treasurer	
Residential .		-	Committee Mailing Address	
E-mail: joelsilva.dsc	@gmail.com	E-mail:		
Phone # (optional): 41324	42037	Phone # (optional):		
	SUMMARY BALAN	CE INFORMATION:		
Line 1: Ending Ba	lance from previous report			
Line 2: Total recei	pts this period (page 3, line 11	.)		
Line 3: Subtotal (1	ine I plus line 2)			
Line 4: Total expe	nditures this period (page 5, li	ne 14)	\$760.00	
Line 5: Ending Ba	lance (line 3 minus line 4)	Michael Hart British and American Challenge		
Line 6: Total in-ki	nd contributions this period (p	page 6)		
Line 7: Total (all)	outstanding liabilities (page 7))		
Line 8: Name of b	ank(s) used: TI	D Bank		
Affidavit of Committee Treasurer: I certify that I have examined this report includes activity, including all contributions, loans, reco	ripts, expenditures, disbutsements, in-kind	I contributions and liabilities for th	is reporting period and represe	all campaign finance
finance activity of all persons acting under the Signed under the penalties of perjury:	authority or on behalf of this committee i		s of M.G.L. c. 55	
FOR CANDIDATE FILINGS ONI	Y: Affidavit of Candidate: (check I i	oox only)		2m
Candidate with Committee I certify that I have examined this report i activity, of all persons acting under the au incurred any liabilities nor made any expe	thority or on behalf of this committee in a	accordance with the requirements of	of M.G.L. c. 55. I have not rec	
Candidate without Committee I certify that I have examined this report i finance activity, including contributions, i campaign finance activity of all persons a	oans, receipts, expenditures, disbursemen	its, in-kind contributions and habil	ities for this reporting period a ne requirements of M.G.L. c. 5	nd represents the 5.
Signed under the penalties of perjury:	Total 1/100	(Candidat	e's signature) Date: _	03/22/22

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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11 11 10 10 10 10 10 10 10 10 10 10 10 1			
	The state of the s		
ine 9: Total Rece	ipts over \$50 (or listed above)		
ine 10: Total Rec	eipts \$50 and under* (not listed above)		
ine 11: TOTAL	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 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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			RECEIVED NAME LUDLIN
			FLUDE
			5 6
ne 9: Total Receip	ots over \$50 (or listed above)		
ne 10: Total Recei	pts \$50 and under* (not listed above)		
ne 11: TOTAL R	ECEIPTS 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
03/21/22	Turley Publications	24 Water St, Palmer MA 01069	Political Ad	\$760
11-17-17-17				
	0 a 30 €			
>	23 A 23 OF LUDIN			
	10%: 1			
		Transition of the state of the		
	The state of the s			
1		Line 12: Total Expenditures ov	er \$50 (or listed above)	\$760.00
		Line 13: Total Expenditures \$50	and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	\$760.00

^{*} 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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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	<u> </u>	<u>.</u>		<u></u>
11				
	Li	ne 12: Expenditures over \$50	(or listed above)	
	 	ne 13: Expenditures \$50 and		
			(not holes tooye)	
	Enter on page 1, line 4 → Li	ne 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.

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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1/1/1	CS A 23 A VF LUDI			
Q Q	10 WN (F			
-				
		Line 15: In-Kind Contributions 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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				<u></u>
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		B. S.		
<u> </u>	Enter on page 1 line 7 -	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	