

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonweal of Massachuse			RECE	IVED				Fi	ile with	Oits: or Tou	Clark or F	To alon	Commission
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Type of R	Report: (Ch	eck one)	TOWN OF L	1101 071									
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			SUM	MARY BAI	LANCI	E INFO	RMAT	ION:	****			_	
:	Line 1:	Ending B	alance from	previous repo	ort		4	XX	H		0		
	Line 2:	Total rece	ipts this peri	iod (page 3, li	ine 11)		8	309	.5	0			
	Line 3:	Subtotal (line 1 plus li	ine 2)			7	709	ے ،	.70			
	Line 4:	Total expe	enditures thi	is period (page	e 5, line	14)		- ()					
	Line 5:	Ending Ba	alance (line :	3 minus line 4	4)	, , , , , , , , , , , , , , , , , , , 		80c	1.5	<u>U</u>			
	Line 6:	Total in-k	ind contribu	itions this peri	iod (pag			~0					
	Line 7:	Total (all)	outstanding	g liabilities (pa	age 7)		Mys		XX.	X160	2198		
	Line 8:	Name of b	bank(s) used	Lusc) te	derc	$\frac{10}{10}$	ie di	+ (Drig			
I certify that I hat I had activity, include finance activity	ling all contributi	his report inclu- ions, loans, rec- oting under the	eipts, expenditur	hedules and it is, to res, disbursements, behalf of this const	, in-kind co.	entributions a	and liabilition ith the requi	es for this n	reporting p f M.G.L.	period and rec. 55.	represents the	ipaign f	finance aign
FOR CANI	DIDATE FII	LINGS ON	LY: Affidavit	of Candidate: (ch	heck 1 box	only)							
I certify the activity, of incurred as	of all persons action with the person of the	ned this report ing under the aumade any expe	uthority or on bet	ed schedules and it half of this commit behalf during this r	ittee in acco	ordance with	the require	ments of M	4.G.L. c. :	55. I have n	atement of al tol received :	I camps any con	aign finance stributions,
l certify th	ctivity, including	ned this report : contributions,	loans, receipts, e	ed schedules and it expenditures, disbu authority or on beh	ursements, i	in-kind cont	ributions an	id liabilities	s for this (reporting pe ents of M.G.I	criod and repa L. c. 55.		
Signed under	the penalties of	perjury:	Clevo	me Uli	עפע	rueko) (C	andidate's s	signature') Da	ate:	<u> 이 ~</u>	047

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 vear. 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)
3/13/2023	Mike Kelliher	500.00	Dentist-Simply Dental of Long meadow
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<u> </u>	TOW W		
J.W.	700 TO		
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ine 9: Total Reco	eipts over \$50 (or listed above)	500.00	
	eipts \$50 and under* (not listed above)	309,50	
ine 11: TOTAL	RECEIPTS IN THE PERIOD	809.50	← Enter on page 1, line 2

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

Date Paid	To Whom Paid (alphabetical listing)	A didwara	The same of F	
	(arphabetical fisting)	Address	Purpose of Expenditure	Amount
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			Tables of the state of the stat	
		Line 12: Total Expenditures	over \$50 (or listed above)	
	<u></u>		<u>.</u>	
	ا	Line 13: Total Expenditures	\$50 and under* (not listed above)	
	Enter on page 1, line 4 →			

^{*} 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
		-	
-			
	11: 45 0w		
<u>></u> Ш	0F LUD		
K.	2023 MA TOWN		
Line 9: Total Rece	ipts over \$50 (or listed above)		
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL I	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

Page 3

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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		THE CONTRACT OF THE CONTRACT O			
				7-7-1	
		Line 15: In-Kind Contributio	ns over \$50 (or listed above)		
	Line 16: In-Kind Contributions \$50 & under (not listed above)				
		Line 17: TOTAL IN-KIND			

^{*} 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 B: EXPENDITURES (continued)

SCHEDULE B: EXPENDITURES (continued)						
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount		
		TI- NOWA SE	Pustcards			
13/10/2023	Ken Elstein	76 North St Belchertown 01007	Postage	607.8		
		DE/CNEL-LOOK LONG		,		
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				13.67		
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<u> </u>			. ,			
		Line 12: Expenditures over \$50	(or listed above)			
		Line 13: Expenditures \$50 and a	under* (not listed above)			
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD			
***	at an an analysis and other and and	r, include them in line 12. Line 13 sl	hould include only those suppordition			

^{*} 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 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
3/10/2023	Ken Elstein	76 North St Belchertown acon	Postcard Postage	13.509
3/14/2023	Ken Elstein	N II		13.67
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