

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachuseus	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	1/2022 Ending Date: 12/31/2022
Type of Report: (Check one)	
☐ 8th day preceding preliminary ☐ 8th day preceding election	30 day after election year-end report dissolution
Gandidate Full Name (if applicable)	School Committee Committee Name
School Committee	
Office Sought and District  235 FRIA DIVC LUCION MA 01056  Residential Address	Name of Committee Treasurer  305 Fuller St., Luglly MA 01056  Committee Mailing Address
E-mail: S-bweechalowes. 019	E-mail: S_bowler & hadles ps. org
Phone # (optional): 413 - 221-1161	Phone # (optional):
213-081-1101	There is (optional).
SUMMARY BALANC	F INFORMATION:
SUMMART BALANC	E INTORNATION.
Line 1: Ending Balance from previous report	8
Line 2: Total receipts this period (page 3, line 11)	<b>8</b>
Line 3: Subtotal (line 1 plus line 2)	8
Line 4: Total expenditures this period (page 5, line	e 14)
Line 5: Ending Balance (line 3 minus line 4)	A M M M
Line 6: Total in-kind contributions this period (pa	ge 6) F 8
Line 7: Total (all) outstanding liabilities (page 7)	DLOV
Line 8: Name of bank(s) used:	(CE)
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:	contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	x only)
	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, period that are not otherwise disclosed in this report.
andidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this	, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date: 1116/33

#### 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.)

inc 9: Total Receipts over \$50 (or listed above)  inc 10: Total Receipts \$50 and under* (not listed above)		Name and Residential Address		Occupation & Employer	
ne 9: Total Receipts over \$50 (or listed above)  ne 10: Total Receipts \$50 and under* (not listed above)	Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
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ine 10: Total Receipts \$50 and under* (not listed above)					
ine 10: Total Receipts \$50 and under* (not listed above)					
	ine 9: Total Recei	pts over \$50 (or listed above)			
ine 11: TOTAL RECEIPTS IN THE PERIOD ← Enter on page 1, line 2	ine 10: Total Rece	ipts \$50 and under* (not listed above)			
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	me II. IOIAL N	ECEIF IS IN THE PERIOD	<u> </u>	Enter on page 1, line 2	

<sup>\*</sup> 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)**

Name and Residential Address Occupation & Employer				
Date Received	(alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	
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Line 9: Total Recei	pts over \$50 (or listed above)			
	ipts \$50 and under* (not listed above)			
	RECEIPTS IN THE PERIOD	<u> </u>	Enter on page 1, line 2	

<sup>\*</sup> 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.)

To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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	-	Line 12: Total Expenditures ov	er \$50 (or listed above)	
		Line 12. Tetal Francisco - 05/	O and and sweet the date of the control of the cont	
	į	Line 13: Total Expenditures \$50	and under" (not listed above)	
		Line 14: TOTAL EXPENDIT	UDES IN THE DEDICED	

<sup>\*</sup> 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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	L	ine 12: Expenditures over \$50	(or listed above)	
	L	ine 13: Expenditures \$50 and	under* (not listed above)	
	Enter on page 1, line $4 \rightarrow L$	ine 14: TOTAL EXPENDIT	URES IN THE PERIOD	
	·		hould include only those expenditures	<u>L</u>

<sup>\*</sup> 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
			8 9	
			JAN 18	ECH
			OWN OF LUDLON	VEC
			33	
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
		Line 16: In-Kind Contributions	S50 & under (not listed above)	
	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			

<sup>\*</sup> 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>		Line 18: TOTAL OUTSTAND		