

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	RECEIVED Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 4-28-	TOWN CELRAIN DEFINE
	2023 JAN 17 A 11. 03
Type of Report: (Check one)	TOWN OF LUDLOW
8th day preceding preliminary 8th day preceding election	30 day after election  year-end report dissolution
RONALD G. SALOIO	COMMITTEE TO ELECT RONALD SALOIO
Candidate Full Name (if applicable)  SCHOOL COMMITTEE	Committee Name KIMBERLY ANNE BABIN
Office Sought and District	Name of Committee Treasurer
52 SCOTT STREET, LUDLOW, MA 01056	52 SCOTT STREET, LUDLOW, MA 01056
Residential Address	Committee Mailing Address
E-mail: RNLSALOIO@GMAIL,COM	E-mail: PKBABIN1@GMAIL,COM
Phone # (optional): 413-459-7436	Phone # (optional): 413-355-6203
SUMMARY BALANC	E INFORMATION:
	,
Line 1: Ending Balance from previous report	68.11
Line 2: Total receipts this period (page 3, line 11)	o
into 2. Tour receipts and period (page 3, me 11)	
Line 3: Subtotal (line 1 plus line 2)	68.11
Line 4: Total expenditures this period (page 5, lin	e 14) 0
Line 5: Ending Balance (line 3 minus line 4)	68.11
Line 6: Total in-kind contributions this period (pa	oge 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	О
Line 8: Name of bank(s) used: LUSO CREDIT UNIO	N
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 finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perfury:	contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidave-check 1 bo	only)
	be best of my knowledge and belief, a true and complete statement of all campaign finance coordance with the requirements of M.G.L. c. 55. I have not received any contributions, g period that are not otherwise disclosed in this report.
Candidate 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 or behalf of the	s, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date: 12-31-2022

#### 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 & Whitelever	
Date Received	(alphabetical listing required)	Amount	Occupation & Korphoyer  (for contrastions of \$200 or more)	
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			TOWN OF LUDLOW	
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ine 9: Total Rece	ipts over \$50 (or listed above)	0		
ine 10: Total Pec	eipts \$50 and under* (not listed above)			
me 10. Total Rec	cipis \$50 and under (not used above)			
	RECEIPTS IN THE PERIOD	1 3		

<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	
			(for contributions of \$200 or more)
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			TOWN OF LUDLOW
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ane 9. Total Recei	pts over \$50 (or listed above)		
ine 10: Total Rece	ipts \$50 and under* (not listed above)	O	
		<u> </u>	1
4 44 (014) 2011 4 7 10	ECEIPTS IN THE PERIOD	o	← 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 \$ 1.0000.

Date Paid	To Whom Paid (alphabetical listing)	Address	Parpose of Expendicure	Amount
			Power of Expenditure	
				<u></u>
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				<u> </u>
		Line 12: Total Expenditures ove	r \$50 (or listed above)	Ē
		Line 13: Total Expenditures \$50	and under* (not listed above)	
	Enter on page 1, line 4 -	·		<u> </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.

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#### SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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			TOWN OF LUDLOW	
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		Line 12: Expenditures over \$	\$50 (or listed above)	
		Line 13: Expenditures \$50 ar	nd under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPEND	ITURES IN THE PERIOD	

<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.

Page 5

#### 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
			Description of Enhance of Suppose Supp	
			TOWN OF LUDLOW	
		Line 15: In-Kind Contributions	over \$50 (or listed above)	0
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	0
	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			0

<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 Duc	Address	Purpose	Amount
			Purpose RECEIVED TOWN CLERK'S OFFICE	
			2073 JAN 17 A 11: Ou	
	į		TOWN OF LUDLOW	
				<u> </u>
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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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			TOWN OF LUDLOW	
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		Line 18: TOTAL OUTSTAN	NDING HADII ITIES (ALLA	h

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50 CIT-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page WN CLERK'S OFFICE

<del></del>	2023 JAN 17 A II: OLi			
Date Received	From Whom Received*		Description of Contribution	Value
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