

Form CPF M 102: Campaign Finance Report **Municipal Form** nce File with: City or Town Clerk or Election Commission

Office of Campaign and Political Finance

Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissection	olution
Candidate Full Name (if applicable) HAVENUM CAN CONTINUE A. W. Mame of Committee Name Office Sought and District Name of Committee Treasurer Po BN 1075 - MES Committee Mailing Address E-mail: Phone # (optional):	OLIV
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) Z294.99	
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: HAVENHUL BAUL	v *
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 activity, including all contributions, loans, receipts, expenditures, disbursements, in kind contributions and liabilities for this reporting period and represents the campa finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: [Treasurer's signature] Date: Date: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)	tinance aign
Capilidate with Committee Capilidate with Committee 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 camps activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any con incurred any liabilities nor made any expenditures on my behalf during this reporting 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 best of my knowledge and belief, a true and complete statement of all camps.	tributions,
finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents 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.	ugn the
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.)

report an receipts. Flease 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)			
7/30/21	TBEW WCAL 103 Z55 FREGOR ST DOLLHESTER, MA OZIL	103.00	LUCAL UNION 103			
9/25/21	TIM SIMMONS 326 CONCOND ST MANTALLIU, MA DIRO	100.00				
9/25/21	MALL KIDJER 120 GROVERAND ST HANDAMUL MA ORTO	50.00				
9/10/21	MERLIMEN UALLOY AFT CO 169 MERRIMEN ST LOWELL, A 01852	500.00	AFL-CLO			
glata	ADAM RAJCZYK YE MANTANO STREET HATCHILL, MA 0830	50.00				
9/25/21	JOHN ROBRIGUEZ 32 S. WIMBAUST WANGALIM NA OTEST	100.00				
		·				
		·				
Line 9: Total Receipts over \$50 (or listed above)		903.00				
Line 10: Total Receipts \$50 and under* (not listed above)		895.60				
	ECEIPTS IN THE PERIOD receipts of \$50 and under, include them in line	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
		7	Turpose of Expenditure	Amount
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L		Line 12: Total Expenditures over \$50 (or listed above)		X
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD				
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDITU	IRES 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 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
9/25/21	MICHTELLADO	91 PITMAN ST MOHUTU, MA	PAPERWONL	100.ω
		Line 15: In-Kind Contributions of	over \$50 (or listed above)	100.00
		Line 16: In-Kind Contributions \$	50 & under (not listed above)	.,
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	NTRIBUTIONS	100.W

^{*} 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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