



Form CPF M 102: Campaign Finance Report
Municipal Form
 Office of Campaign and Political Finance

File with:
 City or Town Clerk or Election Commission

Please print or type all information, except signatures.

RECEIVED
 TOWN CLERK'S OFFICE
 2012 APR 24
 2012-26
 TOWN OF LUDLOW

Fill in dates:
 Reporting Period Beginning March 19 ^{Month} 2012 ^{Year} Ending April 23 ^{Month} 2012 ^{Year}

Type of report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Carmina Fernandes
 Full Name of Candidate (if applicable)
Board of Selectman
 Office Sought and District
One Swan Ave. Ludlow MA
 Residential Address
(413) 583-2060
 Tel. No. (optional)

Committee to elect Carmina Fernandes
 Committee Name
Grace Dias
 Name of Committee Treasurer
884 Poole St. Ludlow MA
 Committee Mailing Address
(413) 250-2823
 Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>4710-</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>585-</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>5295-</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>3717.56</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>1577.44</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>0</u>
Line 8: Name of bank(s) used	<u>Chitopee Savings Bank</u>

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 finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign 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:
[Signature] _____ Date 4/23/12

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)
 Candidate with Committee and no activity independent of the 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 campaign 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. I have not received any contributions, incurred any liabilities nor made any expenditure on my behalf during this reporting period.
 Candidate without Committee OR Candidate with independent activity filing separate report
 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 finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign 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:
[Signature] _____ Date 4/23/12

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.

This page may be copied 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)
3-16	Fundraiser donation	15 -	Personal / individual
3-30	Pamela Hastings 707 Center St Ludlow	50 -	Personal / Individual
3-30	Cornelius Phillips 185 Belmont Ave Springfield	500 -	Personal / Individual
4-20	Grace Dias 884 Poole St Ludlow	20 -	Personal / Individual
Line 9: Total receipts in excess of \$50 (or listed above)		500 -	Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)		85 -	
Line 11: TOTAL RECEIPTS IN THE PERIOD		585 -	

* 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.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
3-21	Tony @ Kennys	18 Canterbury Ludlow	Fundraiser Food	739 29
3-29	Ludlow Printing	44 Sewall St Ludlow	Friendship Cards	106 25
4-19	Checks Signs	535 East main Chicopee MA 01020	Banner / Vote today Signs	157 25
4-23	Checks Signs	535 East main Chicopee	Sign Design	100 -
4-12	monta Legre Rest	191 State St Ludlow	Celebratory function	540 -
4-23	Carmina Fernandes Reimbursement Signs/Flags	1 Swan Lud	Signs & Flags	1633 41
4-23	Carmina Fernandes Reimbursement Postage	1 Swan Lud	Postage	81 -
4-23	Carmina Fernandes Volunteer refreshments	1 Swan Lud	Volunteer Refreshments	360 36
Line 12: Expenditures over \$50				3777 56
Line 13: Expenditures \$50 and under*				00
Line 14: TOTAL EXPENDITURES				3777 56

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.

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 include 1 in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-kind over \$50				N/A
Line 16: In-kind \$50 and under				N/A
Line 17: Total In-kind				

Enter on page 1, line 6

* 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.

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
Line 18: OUTSTANDING LIABILITIES (ALL)				N/A

Enter on page 1, line 7