

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

OI IVIBSSECTIUSCUS	File with: City of Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 1/1/2014	Ending Date: ERY 3/10/2014
Type of Report: (Check one)	2014 FEB 26 A II: 11
, , , , , , , , , , , , , , , , , , , ,	1 0 1 0 TOWNERS LUBLOW.
8th day preceding preliminary 8th day preceding election 30	day after election W D year end report dissolution
Thomas Haluch Candidate Full Name (if applicable)	N/A
Candidate Full Name (II applicable)	Committee Name
Board of Public Works	
Office Sought and District	Name of Committee Treasurer
169 Munsing Street	
Residential Address	Committee Mailing Address
Telephone Number (optional): 413-589-1815 Telep	hone Number (optional):
SUMMARY BALANCE INI	FORMATION:
Line 1: Ending Balance from previous report	0.00
Line 2: Total receipts this period (page 3, line 11)	\$0.00
Line 3: Subtotal (line 1 plus line 2)	0.00
Line 4: Total expenditures this period (page 5, line 14)	0.00
Line 5: Ending Balance (line 3 minus line 4)	\$0.00
Line 6: Total in-kind contributions this period (page 6)	0.00
Line 7: Total (all) outstanding liabilities (page 7)	0.00
Line 8: Name of bank(s) used: N/A	
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best of my kr activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributifinance activity of all persons acting under the authority or on behalf of this committee in accordance.	ions and liabilities for this reporting period and represents the campaign
Signed under the penalties of perjury: N/A	(Treasurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: 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 n activity, of all persons acting under the authority or on behalf of this committee in accordance incurred any liabilities nor made any expenditures on my behalf during this reporting period.	my knowledge and belief, a true and complete statement of all campaign finance with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee OR Candidate with independent activity filing separate r  I certify that I have examined this report including attached schedules and it is, to the best of r finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind campaign finance activity of all persons acting under the authority or or behalf of this commit Signed under the penalties of perjury:	ny knowledge and belief, a true and complete statement of all campaign contributions and liabilities for this reporting period and represents the tige in accordance with the requirements of M.G.L. c. 55.

#### 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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	N/A		
Line 9: Total Receip	ots over \$50 (or listed above)	\$0.00	
Line 10: Total Recei	pts \$50 and under* (not listed above)	\$0.00	
Line 11: TOTAL R	ECEIPTS IN THE PERIOD	\$0.00	← 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)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	
	N/A			
	· : :			
The state of the s				
ne 9: Total Receip	ts over \$50 (or listed above)	\$0.00		
ne 10: Total Receip	ots \$50 and under* (not listed above)	\$0.00		
ie 11: TOTAL RI	ECEIPTS IN THE PERIOD	· \$0.00	← 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		<u> </u>	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	N/A			\$0.00
				40.00
				\$0.00
	·			
	1.17			
			Account of the control of the contro	
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			and the state of t	
***************************************			The state of the s	
		Line 12: Total Expenditures o	ver \$50 (or listed above)	\$0.0
		Line 13: Total Expenditures \$5	50 and under* (not listed above)	\$0.0

<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)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	N/A			
		Line 12: Expenditures over \$5	0 (or listed above)	\$0.0
		Line 13: Expenditures \$50 and	under* (not listed above)	\$0.0
	Enter on page 1, line 4 -	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	\$0

<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
	N/A		
	÷		
		Line 15: In-Kind Contributions over \$50 (or listed above)	\$0.00
		Line 16: In-Kind Contributions \$50 & under (not listed above)	\$0.00
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CONTRIBUTIONS	\$0.00

<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
	N/A			
				· · ·
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	\$0.00



# Schedule E Municipal Form

# Disclosure of Assets Statement Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission	on		CPF ID#	
This fam. about the find her	all aandidataa a	nd committees with each	-	olution report
This form should be filed by		na committees with each		
Committee Name: Thomas Hall	uch		Date of re	port: March 17, 201
All can	didates and co	mmittees must fill in Pa	rt A <u>or</u> Part B.	
Part A:				
<del>-X</del> 1	1 61' 4'	11.1	. 48	
No assets* were acquired or disport B:  Assets acquired: List all assets acquired:				
have filed, list all assets.	and since the	Committee last med this	statement. II this is we	
Asset	Date	Present Location	Manner Acquired	Cost/Value
Include year, model or other identifying	Acquired			
information, if applicable.				
			,	
		*4		
	•	t y m		
Assets disposed of: List all assets sol  Asset Include year, model or other identifying information, if applicable.	Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	Disposition Value Attach statement of how value is determined.
Assets acquired by a political committee mu of that committee. Assets may be disposed of	of at any time, but	must be disposed of prior to	dissolution.	
*An asset is defined as any one item that ha a cost/value of \$1,000 or more at the time of	s a useful life of acquisition.	more than one year, would be	depreciable in a normal bu	siness environment, and ha
Signed under the penalties of perjury:		Sig	ened under the penalties of	perjury:
to any or Waluch	3/11/20	cf	N/A	
Candidate signature Date		// Tr	easurer signature	Date
Attach additional sheets, if necessary	, to disclose all	assets acquired or dispo	sed of in a reporting pe	riod.

9/96



### Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE MUNICIPAL FORM

Office of Campaign and Political Finance

		•	
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	t or time all information, except cid	natures	
		*	ranization of a
ollows:	the provisions of General Laws, Ch	apter 33, as amended, of the of	gamzauon or a
None		·.	
(The name of the committee	must include the candidate's last name)		
	•		
····			
		<u> </u>	<del> </del>
Name	Residential Address	Zip Tel. No.	
<u>,</u>			-
·			
Attach additional page, if ne	cessary, with other officers and finance commi	ttee, if any	
Name	Address	Zip Tel. No.	
			· .
Title	District	Party affiliation, if applic	able
organization of more the keep detailed accounts a of the relevant election. SIGNED UNDER THE	an one committee on his/her behalf and records of all campaign finance PENALTIES OF PERJURY:	. I am aware that candidates as	e required to
Candidate's signature		Date v	
certain duties and liabil and keeping detailed ac the date of the relevant	ities under M.G.L. c. 55, including counts and records of all campaign election.	the timely filing of campaign f	inance reports
Treasurer's signature		Date	
		committee.	
Chairman's signature		Date	
	Name  Name  Name  Name  Title  I hereby consent to the corganization of more the relevant election. SIGNED UNDER THE certain duties and liabil and keeping detailed accounts a contract of the relevant election. SIGNED UNDER THE Candidate's signature. I hereby accept the office certain duties and liabil and keeping detailed accounts and liabil and keeping detailed accounts and liabil and keeping detailed account signature. SIGNED UNDER THE Treasurer's signature. I hereby accept the office signature of the relevant signature. I hereby accept the office signature of the relevant signature.	Please print or type all information, except signer in accordance with the provisions of General Laws, Chillows:  None  (The name of the committee must include the candidate's last name)  Name  Residential Address  Name  Address  Title  District  I hereby consent to the filing of this committee. I understate organization of more than one committee on his/her behalf keep detailed accounts and records of all campaign finance of the relevant election.  SIGNED UNDER THE PENALTIES OF PERJURY:  Linereby accept the office of treasurer of the above-named certain duties and liabilities under M.G.L. c. 55, including and keeping detailed accounts and records of all campaign the date of the relevant election.  SIGNED UNDER THE PENALTIES OF PERJURY:  Treasurer's signature  I hereby accept the office of Chairman of the above-named certain duties and liabilities under M.G.L. c. 55, including and keeping detailed accounts and records of all campaign the date of the relevant election.  SIGNED UNDER THE PENALTIES OF PERJURY:  Treasurer's signature  I hereby accept the office of Chairman of the above-named SIGNED UNDER THE PENALTIES OF PERJURY:	Please print or type all information, except signatures  EN in accordance with the provisions of General Laws, Chapter 55, as amended, of the or illows:  None  (The name of the committee must include the candidate's last name)  Name  Residential Address  Zip  Tel. No.  Attach additional page, if necessary, with other officers and finance committee, if any  Name  Address  Zip  Tel. No.  Title  District  Party affiliation, if applic or granization of more than one committee on his/her behalf. I am aware that candidates are keep detailed accounts and records of all campaign finance activity for a period of six year of the relevant election.  SiGNED UNDER THE PENALTIES OF PERJURY:  Laws Candidate's signature  I hereby accept the office of treasurer of the above-named committee. I understand that I certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance activity for a period of the date of the relevant election.  SiGNED UNDER THE PENALTIES OF PERJURY:  Treasurer's signature  Date  I hereby accept the office of Chairman of the above-named committee.  I hereby accept the office of Chairman of the above-named committee.  SiGNED UNDER THE PENALTIES OF PERJURY: