

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	2021 MAP Ending Date: 2 / 2			
Fill in Reporting Period dates: Beginning Date:	-51 p 3 / 5 / 6/			
Type of Report: (Check one)	TOWN OF LUDLOW			
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution			
11				
Candidate Full Name (if applicable)				
RECREATION COMMISSIONER	Committe Name			
Office Sought and District	Name of Committee Treasurer			
Residential Address	Committee Mailing Address			
E-mail: ROTTILOVER 89 @ YALOO. Com	E-mail:			
Phone # (optional): 4/3 3565324	Phone # (optional):			
SUMMARY BALANC	E INFORMATION:			
Line 1: Ending Balance from previous report	-0 -			
ine 2 Total receipts this period (page 3, line 11)	212,50			
Line 3 Subtotal (line 1 plus line 2)	2/2.50			
Line 4: Total expenditures this period (page 5, line	2/2,50			
Line 5: Ending Balance (line 3 minus line 4)	-0-			
Line 6: Total in-kind contributions this period (page	ge 6)			
Line 7: Total (all) outstanding liabilities (page 7)				
Line 8: Name of bank(s) used:				
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best cactivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind co	ontributions 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 a	Deter			
Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	(Treasurer's signature)			
	only)			
Candidate with 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 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 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: 3/5/2/			

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)			
3/7/21		2/250	RETTRED			
	HARRY MILLS					
	·					
			KE CF			
			INE D			
			H			
	ots over \$50 (or listed above) ots \$50 and under* (not listed above)	2/2.5				
	k .	2/2 50	6 Paris			
	receipts of \$50 and under, include them in line		Enter on page 1, line 2			

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
	6		
	<u>u</u> <u>J</u>		
19	## # 30 10		
>	TS OFF		
	MAR I-		
<u>Q</u>	2007 1 1 1 1 1 1 1 1 1		
	71		
Line 9: Total Recei	pts over \$50 (or listed above)		
	_		
	ipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
If you have itemized	receipts of \$50 and under, include them in line	9 Line 10 shoul	Id include only those receipts not itemized above.

^{*} 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.)

Date Paid	To Whom Paid			
	(alphabetical listing)	Address	Purpose of Expenditure	Amount
111				
4				
111				
			~ -	
			10 W	
			MR 17 P 1:	
[5 - 6	
			OFFICE OFFICE D 1: 10	
			■ ₹ # 30	
[L m	
			L	
111				
][]				
		Y ! 10. T-4-1 D	050 / 1:	
		Line 12: Total Expenditures ov	er 550 (or listed above)	
		Line 13: Total Expenditures \$50	and under* (not listed above)	
		Eme 15. Total Expellentitles \$50	and under (not listed above)	
	Enter on page 1 line 4 →	Line 14: TOTAL EXPENDIT	URES 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 B: EXPENDITURES (continued)

	To Whom Paid	 		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
3/6/21	RoberTS PATG	BOJONRY SPR	519NS	2/2.5
		THY		
	D ЭСЕ (: 1ц			
	E1VE			
	PRE OWN 10WN			
		Line 12: Expenditures over \$50		2/2/5
		Line 13: Expenditures \$50 and u	nder* (not listed above)	
tet		Line 14: TOTAL EXPENDITU		2125

^{*} 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
			TOWN	
			DF LUE	
			OFFICE DIFFICE	
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
Line 16: In-Kind Contributions \$50 & under (not listed above)				
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	

^{*} 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
<u> </u>				
	17 · P :: FLUDLOW			
	OZI MAR IOWK			
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	-



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