

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commony		. S I mance
of Massach	RECEIVED	DE0.
Fill in I	Reporting Period dares OFFICE	RECEIVED
		nuary 1, 2022 Ending Date: December 31, 2022
Type of	2024 MAR 19 P 3: 25	2023 JAN 18 P 4: 05
	Report: (Check one)	144
8th d	ay preceding preliminary 8th day preceding election	TOWN OF LUDLOW
	j our day preceding election	☐ 30 day after election ☑ year-end report ☐ dissolution
1.		
James TI	homas Gennette	
	Candidate Full Name (if applicable)	Committee to Elect James Gennette
Selectma	an	Committee Name
	Office Sought and District	Shane Newell
239 State	e Street Ludlow, Ma 01056	Name of Committee Treasurer
	Residential Address	114 Caddyshack Drive, Chicopee, Ma 01020
E-mail:		Committee Mailing Address
Db # /	jaygen1@gmail.com	E-mail: ShaneArthurNewell@gmail.com
Phone # (op	tional): 413-474-1905	
		Phone # (optional): 518-744-1886
	SUMMARY BALANC	CE INFORMATION:
		- I VI OIGHTION.
	Line 1: Ending Balance from previous report	3/11/1 / 1/ 1/ 1/ 1/2000
		3/11/04 Amerola 0 \$ 350.00
	Line 2: Total receipts this period (page 3, line 11)	STG 011
	(4-8-5, Mic 11)	0 11.9. STAN 0
	Line 3: Subtotal (line 1 plus line 2)	
	, - F-= mio 2)	-o#350,00
	Line 4: Total expenditures this period (page 5, line	
	tine of the second control of the second con	e 14) 0
	Line 5: Ending Balance (line 3 minus line 4)	
	- Ending Balance (fille 3 minus line 4)	-o \$13579.0°
	Line 6: Total in Lind	J())
	Line 6: Total in-kind contributions this period (page	ge 6)
	Line 7. To 17 W	0
	Line 7: Total (all) outstanding liabilities (page 7)	
	Line Dr. M. Cl. 143	0
1	Line 8: Name of bank(s) used: Westfield Bank	
Midavit of C	ommittee Treasurer:	
ctivity, includ	ing all contributions loans receipts and it is, to the best of	of my knowledge and belief, a true and complete statement of all campaign finance
nance activity	of all persons acting under the authority or on behalf of this committee in acting the committee in ac	of my knowledge and belief, a true and complete statement of all campaign finance outributions and liabilities for this reporting period and represents the campaign
gned under	the penalties of perjury:	cordance with the requirements of M.G.L. c. 55.
		(Treasurer's signature) Date: 1/19/2023
OR CANE	DIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box of	only)
	with Committee	s.i.y,
I certify the	at I have examined this second in the	
activity, of	all persons acting under the authority or on behalf of this committee in according	est of my knowledge and belief, a true and complete statement of all campaign finance
meured an	y nationales nor made any expenditures on my behalf during this reporting per	est of my knowledge and belief, a true and complete statement of all campaign finance rdance with the requirements of M.G.L. c. 55. I have not received any contributions, eriod that are not otherwise disclosed in this report.
Candidate	without Committee	enter wise disclosed in this report.
I certify tha	at I have examined this report including attached schedules and it is, to the best vity, including contributions, loans, receipts, expenditures, disbursements, in-	st of my knowledge and belief a toward
campaign fi	ivity, including contributions, loans, receipts, expenditures, disbursements, in- linance activity of all persons acting under the authority or on behalf of this car	1-kind contributions and liabilities for this reporting period and campaign
7 - 8 - 11	inance activity of all persons acting under the authority or on behalf of this car	andidate in accordance with the requirements of M.G.L. c. 55.
ned under th	ne penalties of perjury:	D
	- mes / - your	(Candidate's signature) Date: 1/19/2023



Form CPF M 102A: Amendment to Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth of Massachusetts							
File with: City or Town Cl	erk or Election Cor	mmission					
Report Being Amend	led: Year:	2023 Reporting Period:	Beginn	ning Date: 01/01/2022	Endi	ing Date:	12/31/2022
8th day preceding	preliminary	8th day preceding election	3	30 day after election	🗵 year-en	d report	dissolution
James Thomas Genne	ette			Committee to Elect James	es Gennette		
239 State Street Ludl	Candidate Full Nam ow MA 01056	ne (if applicable)		Shane N	Committee N	ame	
Selectman	Residential	Address	_ 23	39 State Street Ludlow			
	Office Sought	and District		Co	mmittee Mailing	g Address	_
E-mail:	jaytgen1	@gmail.com	_ E-	mail: Shun en the	wnews	1109	gradicon
Phone # (optional):		4134741905		none # (optional):			,
		SUMMARY BAL	ANCE	E INFORMATION:			
	Line 1: I	Ending Balance from previous re	port	:		350.00	
	Line 2:	Total receipts this period					
	Line 3: S	Subtotal				350.00	
	Line 4:	Total expenditures this period					
	Line 5: I	Ending Balance		·		350.00	
	Line 6:	Total in-kind contributions this p	eriod				
		Total (all) outstanding liabilities					
	Line 8: 1	Name of bank(s) used: Westfiel	d Bank				
The original filing of	the above-refer	enced campaign finance report is	s being	amended for the follow	ving reason(s):	
						70074	Z Z
					TOWN OF LUDLOW	DZ4 MAR	RECEIVED
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					LUD	ס 3	<i>3</i> √ <i>2</i>
					407	ښ	
					~~	25	Ch
Signed under the penaltie	s of perjury:			Signed under the penalties	of perjury:		

date's signature) Date: 3/11/24

0

Vaucu Date: 3/4/24

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 page 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 & Employ 05 (for contributions of \$200 or more)
			TOWN OF LUDLOW
			MAR OWN (
			EIVED PX'S OFFICE P 3 29
)E
Line 9: Total Rece	eipts over \$50 (or listed above)		
Line 10: Total Rec	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD	0	← 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 A: RECEIPTS (continued)

Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
	(alphabetical listing required)	Timount	RECEIVED TOWN CLERK'S OFFICE
			TOWN CLERK'S OFFICE
			2023 JAN 18 P 14: 05
			TOWN OF LUDLOW
			TOWN TOWN
			2 2 20
			DEIVED ERK'S OFFICE 19 P 3: 29 OF LUDLOW
			OF LUDLOW
			POV W FFD
) ICE : 25
			01
17.90			
ine 9: Total Reco	eipts over \$50 (or listed above)		
ine 10: Total Rec	reipts \$50 and under* (not listed above)		
ine 11: TOTAL	RECEIPTS IN THE PERIOD	0	← 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 at additional pages are required to report all expenditures. Please include your committee name and a page number on each page WN CLERK'S OFFICE

To Whom Paid Purposopf Impenditore u: 05Amount Address (alphabetical listing) **Date Paid** TOWN OF LUDLOW MOHIDUA 30 MMO! Line 12: Total Expenditures over \$50 (or listed above) Line 13: Total Expenditures \$50 and under* (not listed above) Enter on page 1, line 4 → | Line 14: TOTAL EXPENDITURES 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.

Page 4

SCHEDULE B: EXPENDITURES (continued)

SCHEDULE B: EXPENDITURES (continued)					
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
			RECEIVED TOWN CLERK'S OFFICE		
			11 11		
			7023 JAN 18 ₽ ₩ 05		
			TOWN OF LUDLOW		
			10111101		
			V CHICASTIPALI, CARRACAPA SAST		
			3 7		
			2029 WAR	DEC	
			WAR OWN	6	
			9 - E	m	
			LUDLOW 3: 10	K	
			W 401	D	
			20 1		
			A		
		Line 12: Expenditures over \$5	0 (or listed above)		
		Line 13: Expenditures \$50 and	under* (not listed above)		
	Date: 1 1! 4 3	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD		
		include them in line 12. Line 13			

^{*} 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.

RECEIVED

		TOWN CLERK'S OFFICE				
Date Received	From Whom Received*	Residential Address	Description of Contribution Value			
			TOWN OF LUDLOW			
			M NZOZ N NZOZ N MO1			
			* * * * * * * * * * * * * * * * * * *			
			OF LU			
			= 0			
			OFFICE DLOW			
			FICE 3: 2b			
		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 C	ONTRIBUTIONS	0		
		The second control of the least term of the second of the				

^{*} 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.

Page 6

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.

	T. W D.	Address	Phanose.	Amount
Date Incurred	To Whom Due	Address	RECEIVED TOWN CLERK'S OFFICE	- I mount
			2023 JAN 18 P 4: 05	
			TOWN OF LUDLOW	
			TOWN CL	
			TOWN OF LUDLOW	
			DEC D SOL	
			TOWN OF LUDLOW	
	Enter on page 1 line 7 -	Line 18: TOTAL OUTST	TANDING LIABILITIES (ALL)	0