Campaign Finance Tracking Form for Local Election Officials

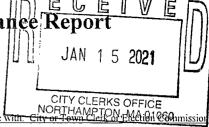
Call OCPF with campaign finance questions at 617-979-8300

Candidate o	Pre-Preliminary Pre-Election 30-Day Year-End
Report:	Pre-Preliminary Pre-Election 30-Day Year-End
•	Organization / Providing Materials / Notification *
	Organizational form provided to candidate or committee (M101, M101BQ, M101PC)
	Campaign finance report form provided to candidate or committee (M102)
	Summary of the campaign finance law provided (OCPF guide booklet)
	Filing notice (includes reporting dates, due dates and language concerning late fines)
	Pre-PreliminaryPre-Election30-DayYear-end
*All forms, gu	ides and notices can be delivered by e-mail
	Inspecting Reports
The camp	aign finance law requires local election officials to "inspect" M102 and M102-0 campaign
	finance reports within 30 days of a due date.
	Correct dates for the relevant reporting period
<u> </u>	Signatures
	Positive ending balance
<u> </u>	If the M102-0 form is filed, the candidate does not have a committees and has not received any contributions, made any expenditures or incurred any obligations during the reporting period, and does not have a campaign fund in existence.
Cont	ributions (Monetary receipts and in-kind contributions)
	Names and Addresses for contributions of more than \$50
•	Occupation and Employer for contributions of \$200 or more
	No contributions from corporations, business partnerships, LLCs or LLPs
	No contributions from individuals for more than \$1,000 (see OCPF's limits chart for other limits)
Expe	enditures
	VPA Vendor Names and Addresses for expenditures of more than \$50
	Purpose information is disclosed
	Reimbursements form (R-1s) filed for reimbursements
	Date of Inspection Jose 26, 20,
•	ela



Form CPF M 102: Campaign Finance Report Municipal Form JAN 1 5

Office of Campaign and Political Finance



Fill in Reporting Period dates: Beginning Date: 1-1-2020 Ending Date: 12-31-2020	133101
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution	
Committee to the Classification of Baye Committee to the Elect Municipalities Committee Name	Sign Sign
Othy Corneilo Mand District Name of Committee Treasurer	
E-mail: 698-Unitroppion Ref. Florence, Mass 198-Unitroppion Isl Florence, Ill Committee Mailing Address E-mail:	1/2
Phone # (optional): 4/3-584-1937 Phone # (optional): 4/3-584-1937	
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) 2,940.25	
Line 4: Total expenditures this period (page 5, line 14)	
Line 5: Ending Balance (line 3 minus line 4) 2940.25	
Line 6: Total in-kind contributions this period (page 6)	-
Line 7: Total (all) outstanding liabilities (page 7)	F
Line 8: Name of bank(s) used: Marthampton appendive Bank	
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: Date: 1.5-275	
Signed under the penalties of perjury: (Treasurer's signature) 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 my knowledge and belief, a true and complete statement of all campaign fin 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 contribution incurred any liabilities nor made any expenditures on my behalf during this reporting period.	nance ons,
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 periods: Oate: A. Candidate's signature)	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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	(10) Continue of 5200 of more)
Line 9: Total Recei	pts over \$50 (or listed above)	0	
Line 10: Total Rece	ipts \$50 and under* (not listed above)	.790	Inhest
Line 11: TOTAL F	RECEIPTS IN THE PERIOD	· · · · · · · · · · · · · · · · · · ·	← Enter on page 1, line 2
 	<u></u>].

^{*} 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)
]			
<u> </u>			
ine 9: Total Recei	pts over \$50 (or listed above)	0	L
ine 10: Total Rece	ipts \$50 and under* (not listed above)	Ø	
ine 11: TOTAL R	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, 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
			; I
			,
		Line 12: Total Expenditures over \$50 (or listed above)	Ø
Line 13: Total Expenditures \$50 and under* (not listed above)			Ø
	Enter on page 1, line 4 -	→ Line 14: TOTAL EXPENDITURES IN THE PERIOD	E

^{*} 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	A 4.4	D 25 E 124	1
Date Faiu	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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		Line 12: Expenditures over \$50	(or listed above)	0
Line 13: Expenditures \$50 and under* (not listed above)			Ø	
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 i				D

^{*} 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
Date Received	From Whom Received	Acsidential Address	Description of Contribution	· ·
				!
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				1
		Line 15: In-Kind Contributions	over \$50 (or listed above)	Ø
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	Ø
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			Ø	

^{*} 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
				İ
				,
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				

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