

Form CPF M 102: Campaign Finance Report

Municipal Form Office of Campaign and Political Finance

2022 JAN 15 AM 11: 16

Fill in Reporting Period dates: Beginning Date: Jan	File with: City or Town Clerk or Election Commis nuary 1, 2021 Ending Date: December 31, 2021
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Candidate Full Name (if applicable) Candidate Full Name (if applicable) Office Sought and District CRISTO LAWE Residential Address Phone # (optional):	Committee Name Committee Name Committee Name Committee Treasurer Committee Mailing Address E-mail: Phone # (optional):
	Priorie # (optional).
SUMMARY BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11	\$ 38.93
Line 3: Subtotal (line 1 plus line 2)	# 38.93
Line 4: Total expenditures this period (page 5, li	ne 14)
Line 5: Ending Balance (line 3 minus line 4)	\$ 38.93
Line 6: Total in-kind contributions this period (p	age 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: Mill Bus	& FERENTL CRAIT UNION
ffidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the bestivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind nance activity of all persons acting under the authority or on behalf of this committee in	contributions and liabilities for this reporting period and represents the campaign

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check I box 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 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 of behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Candidate's signature)

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)	
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Line 9: Total Receip	ots over \$50 (or listed above)		Secretarion and Address and Ad	
Line 10: Total Recei	pts \$50 and under* (not listed above)	0		
ine 11: TOTAL R	ECEIPTS 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	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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	over \$50 (or listed above)	0	
10: Total Receipts S	\$50 and under* (not listed above)	0	
11: TOTAL RECI	EIPTS IN THE PERIOD	←	Enter on page 1, line 2 add only those receipts not itemized above.

Page 3

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 Expendit	ure Amount
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	L	Line 12: Total Expenditures over \$50 (or listed above)	8
		Line 13: Total Expenditures \$50 and under* (not listed a	bove)
	Enter on page 1, line 4 -	Line 14: TOTAL EXPENDITURES IN THE PERIOR	

^{*} 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
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		Line 12: Expenditures over \$	\$50 (or listed above)	0
		Line 13: Expenditures \$50 an	nd under* (not listed above)	0
	Enter on page 1, line 4 -	Line 14: TOTAL EXPEND	ITURES IN THE PERIOD	0

^{*} 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
We have a second		Line 15: In-Kind Contributions over \$50 (or listed above)		
		Line 16: In-Kind Contributions	Name (No.	0
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	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.

To Whom Due	Address	Purpose	Amount

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