

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

2021 HAR 29 PH 3: 38

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	1,2021 Ending Date: March (9,2021
Type of Report: (Check one)	
	30 day after election year-end report dissolution
James Wheelock	None
Candidate Full Name (if applicable)	Committee Name
Office Sought and District  CULLITY  Office Sought and District	Name of Committee Treasurer
E-mail: JVWN eelock@gwelil.lom	Committee Mailing Address E-mail:
Phone # (optional):	Phone # (optional):
SUMMARY BALANCI	F. INFORMATION:
Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 11)	\$50
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, line	: 14) \$ 50
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (pag	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	2
Affidavit of Committee Treasurer:  certify that I have examined this report including attached schedules and it is, to the best o  tetivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind co triance activity of all persons acting under the authority or on behalf of this committee in ac	
	(Treasurer's signature)  Date:
Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the b activity, of all persons acting under the authority or on behalf of this committee in accommitted any liabilities nor made any expenditures on my behalf during this reporting p	pest of my knowledge and belief, a true and complete statement of all campaign finance
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the b finance activity, including contributions, loans, receipts, expenditures, disbursements, i campaign finance activity of all persons acting under the authority or on behalf of this cigned under the penalties of perjury:	pest of my knowledge and belief, a true and complete statement of all campaign

#### SCHEDULE A: RECEIPTS

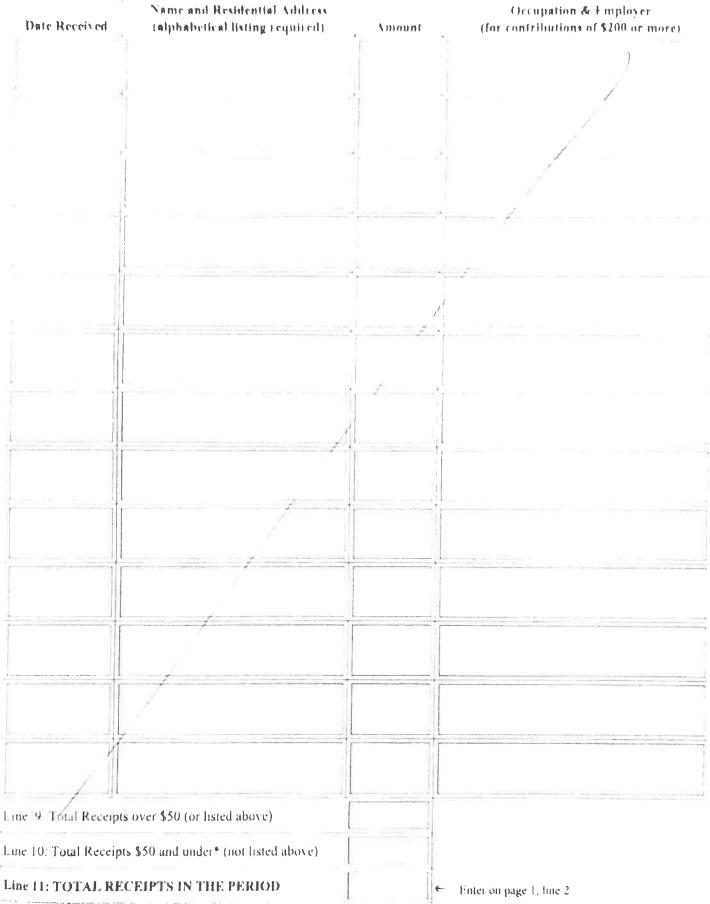
MGT = \$5 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must 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)
249/2021	James wheelock	\$40	Self-employed
3/10/2021	James Meetock	\$10	Carrenter
ine 9: Total Receipts	s over \$50 (or listed above)		
ine 10: Total Receipt	s \$50 and under* (not listed above)	\$50	
	CEIPTS IN THE PERIOD		← 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)



<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	nittee name and a page number on		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	Minuteman press	7		
3/9/2021	[ [N(1)(V   C)   G(1)   [P(3)]	231 E Main Street Milford, MA	Stock: Blank	\$40
		[ MICHOVA, INC. 1-5	coraplast	
2/11/201	Van LDI +	209 West Street	Paint	\$10
2/10/10/1	Koopman Paint	milford, MA		470
		70111011011011		
		}		
			1	
				<u> </u>
		Line 12: Total Expenditures ov	er \$50 (or listed above)	
		Line 12. Tetal Ferranditure Acc	) and muda * ( 1 / 4 / 4 - 1 \	( tr. n
	ē.	Line 13: Total Expenditures \$50	and under* (not listed above)	\$50
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	\$50
	Į.		nould include only those expenditure	

<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
				/
1	/	Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and under* (not listed above)		
IC.	Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD			

<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
	100			
	1111			
		Line 15: In-Kind Contributions	over \$50 (or listed above)	0
		Line 16: In-Kind Contributions \$50 & under (not listed above)		0
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	0

<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
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				0