



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning 1 ^{Month} 2 ^{Date} 2010 ^{Year} Ending 3 ^{Month} 26 ^{Date} 2012 ^{Year}

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

MICHAEL R. WASH

Full Name of Candidate (if applicable)

SCHOOL COMMITTEE - MILFORD

Office Sought and District

15 FRANKLIN STREET

Residential Address

MILFORD, MA 01850-2901

Tel. No. (optional)

COMMITTEE TO REPAIR MIKE WASH MILFORD SCHOOL

Committee Name

NANCY R. WASH

Name of Committee Treasurer

15 FRANKLIN STREET

Committee Mailing Address

MILFORD, MA 01850

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 5.68
Line 2: Total receipts this period (page 2, line 11) \$.00
Line 3: Subtotal (line 1 plus line 2) \$ 5.68
Line 4: Total expenditures this period (page 3, line 14) \$ 5.68
Line 5: Ending balance (line 3 minus line 4) \$ 0.00
Line 6: Total in-kind contributions this period (page 4) \$ -
Line 7: Total (all) outstanding liabilities (page 4) \$ 480.00
Line 8: Name of bank(s) used MILFORD NATIONAL BANK & TRUST

AMY,
PLEASE REPAIR
THIS MISTAKE

NOT BILLED
YET

NOT BILLED
YET

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:

Treasurer's signature (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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 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.

☐ 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 perjury:

Candidate signature (in ink)

Date