



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

Fill in Reporting Period dates: Beginning Date: 4-11-12 Ending Date: 5-21-12

Type of Report: (Check one)

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

<u>Thomas L. Brown</u>
Candidate Full Name (if applicable)
<u>Road Commissioner</u>
Office Sought and District
<u>138 Stafford Rd. Wakes Ma.</u>
Residential Address
Telephone Number (optional): <u>913-245-3898</u>

Committee Name
Name of Committee Treasurer
Committee Mailing Address
Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0⁰⁰</u>
Line 2: Total receipts this period (page 3, line 11)	<u>102.72</u>
Line 3: Subtotal (line 1 plus line 2)	<u>102.72</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>102.72</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>0⁰⁰</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0⁰⁰</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0⁰⁰</u>
Line 8: Name of bank(s) used:	<u>Cash</u>

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)

Date: _____

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 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: Thomas L. Brown (Candidate's signature)

Date: 5/21/12

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4-21	CENTER OF HOPE	100 FOSTER ST. SOUTHBRIDGE	SIGNS	92.72
5/12	WALES TOWN HALL	HOLLOW RD WALES	LABELS	10.00
			Line 12: Expenditures over \$50 (or listed above)	192.72
			Line 13: Expenditures \$50 and under* (not listed above)	10.00
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	102.72

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.