(Manadanara)		File with: City or Term Clark or Upt	tion Commission
	ing Period dates: Beginning Date: 6 9 2	Z Ending Date: 8 12 31	1.Z.
3 8th day prec	rt: (Check one) tding preliminary 🗌 8th day precoding election 🔲 30 day	after election Pycar-end report a	stolution
cait		mittee to clect cartier Contente Same Same Content Transver	
41 15	UNIONO RD N. TWYO POI	Committee Mailant Address	02652
-mail(All	774 516 0417	Califin for hvorgena orient 774-316-041	7
	SUMMARY BALANCE INFO	RMATION:	
	Line 1: Ending Balance from previous report	0.00	
	Line 2: Total receipts this period (page 3, line 11)	0.00	
	Line 3: Subtotal (line 1 plus line 2)	0.00	
-	Line 4: Total expenditures this period (page 5, line 14)	0.00	
	Line 5: Ending Balance (line 3 minus line 4)	0.00	
	Line 6: Total in-kind contributions this period (page 6)	0.00	
	Line 7: Total (all)-outstanding habilities (page 7)	0.00	-
	Line 8: Name of bank(s) used: SLAWUM	S Bank	
This of Canadi	nice Treamarers summed this report including attached schedules and it is, to the best of my knowle summers include comparison of the standard schedules and it is, to the best of my knowle	to antibulied a true and considere statement of all correspondence	ign finance
entropy, including a leasest activity of a ligned under the p	percent acting under the extractly or on behalf of this operation in accordance in southing of persperse.	ed Sabilities for this reporting period and represents the or 9-the requirements of M.O.L. 6, 55. (Treasured's signature) Date: <u>12</u> .	21/22
Candidate with	ATE FILLINGS ONLY: Affidavit of Candidate: (sheek 1 ben only) Consultate or examined this report including structured wheehiles and it is, to the best of my ha reason acting and the substrike or a sub-ball of this constraints in accordance with hilden are made only expenditures on my behalf during this reporting period that are	endedge and belief, a true and complete statement of all on the requirements of M.O.L. z. 53. There not received any out otherwise declared in this report.	empsign finance contributions,

Form CPF M 102: Campaign Finance Report

MGL c Strem		A: RECEI	
	It keep detailed accounts and records of all re- yer must be reported for all persons who cont tripts ^a attachment is available to complete.		
port all mediate a	ceipts" attachment is available to complete. Nease include your committee name and a p	print and attack of any number on ca-	ch page.)
	hease include your committee name and a p	age manee	
Date Received	Name and Residential Address (alphabetical listing required)	Amount	(for contributions of SI
	(approvinces many requires)		
ine 9: Total Receipts over \$50 (or listed above)		0	
ine 10: Total Receipts \$50 and under* (not listed above)			
ine 11: TOTAL RECEIPTS IN THE PERIOD		6	+ Enter on page 1, line 2
f yeu have itemized receipts of \$50 and under, include them in line			