

## Form CPF M 102-0: Campaign Finance Report Municipal Form

A Comment	Office of Campaign and Political Finance					
Commonwealth of Massachusetts			•			
City or Town of:	Please print or type all	information, exce	ept signatures.	BURY, MA	OWN CLE	
Fill in dates: Mont Reporting Period Beginning	Day 2	Year Endir	Month MAR	Day &	Year Roll	
Type of Report: (Check One)						
8th day preceding 28 preliminary/primary	• • • • • • • • • • • • • • • • • • • •		30th day following election (Town or Special)		☐ 20th day of January (Year-End Report)	
Pursuant to M.G.L., Chapter 55:		_				
<ol> <li>I certify that I am a candidate</li> <li>I certify that I have not receive</li> </ol>			, or incurred any o	bligations during	this	

- reporting period, and do not have a campaign fund in existence.
- 3. I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT	
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