



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth  
of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-2022 Ending Date: 12-31-2022

Type of Report: (Check one)

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

Keith M. Sullivan  
Candidate Full Name (if applicable)  
School Committee  
Office Sought and District  
67 DEWEY ST. TEWKSBURY, MA 01876  
Residential Address

E-mail: \_\_\_\_\_  
Phone # (optional): \_\_\_\_\_

COMMITTEE TO ELECT KEITH M. SULLIVAN  
Committee Name  
CHARLENE A. SULLIVAN  
Name of Committee Treasurer  
215 POLAND AVE. TEWKSBURY, MA 01876  
Committee Mailing Address

E-mail: cjaugust10@yahoo.com  
Phone # (optional): \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

TOWNS CLERK  
BOARD OF REGISTRARS  
TEWKSBURY, MA  
01876  
APR 11 2023

Line 1: Ending Balance from previous report	<u>146.29</u>
Line 2: Total receipts this period (page 3, line 11)	<u>- 0 -</u>
Line 3: Subtotal (line 1 plus line 2)	<u>146.29</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>146.29</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>- 0 -</u>
Line 6: Total in-kind contributions this period (page 6)	<u>- 0 -</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>- 0 -</u>
Line 8: Name of bank(s) used:	<u>TD BANK, MAIN ST. TEWKSBURY, MA 01876</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: Charlene A. Sullivan (Treasurer's signature) Date: 1-3-2023

#### FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

##### Candidate with 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 that are not otherwise disclosed in this report.

##### Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Keith M. Sullivan (Candidate's signature) Date: 1-3-23







