



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

Office of Campaign and Political Finance

f Massachusetts				Please n	int or type all information, except signature
City or Town of:	MAnover,	MA			
teporting Period:	Beginning:	1/1/2017 (MM/DD/YYYY)	Ending:	12/31/201	/ M/D D /YYYY)
ype of Report: (Chec	k One)				/
38th day preceding	preliminary/primary	8th day preceding election 30th	day following election (town or	special) 20th	h day of January (Year-End report)
2. I certify that I b					not have a campaign fund in existence.
DATE	PRINT NAME	Signed under the penalties o		AL ADDRESS d Number)	OFFICE SOUGHT
	OHN GETTLY		248 MAN	NS DR.	
777,30					