



**Form CPF WT 1 Disclosure of Wire Transfer Expenditures  
Office of Campaign and Political Finance**

Commonwealth  
of Massachusetts

File with: Director  
Office of Campaign and Political Finance  
One Ashburton Place  
Boston, MA 02108  
(617)727-8352

Please print or type all information, except signatures.

Please itemize any wire transfer by detailing the date wired, address purpose and amount for each expenditure.

Committee Name: \_\_\_\_\_ CPF ID#: \_\_\_\_\_

Report Dates for this form: \_\_\_\_\_ through \_\_\_\_\_

Date of Wire Transfer	Vendor Name and Address	Purpose of Expenditure	Amount
<b>TOTAL EXPENSE:</b>			

\_\_\_\_\_  
Signature of Candidate/Treasurer

\_\_\_\_\_  
Date