



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date:  Ending Date:

Type of Report: (Check one)  
 8th day preceding preliminary     8th day preceding election     30 day after election     year-end report     dissolution

Candidate Full Name (if applicable)

Office Sought and District

Residential Address

Telephone Number (optional):

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<input type="text" value="0"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="7,582"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="7,582"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="74"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="7508"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text"/>
Line 8: Name of bank(s) used:	<input type="text" value="People's Bank"/>

RECEIVED  
 OCT 28 10 07 AM '15  
 CITY CLERK'S OFFICE  
 HOLYOKE

**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:  (Treasurer's signature) Date:

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

**Candidate with Committee and no activity independent of the 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.

**Candidate without Committee OR Candidate with independent activity filing separate report**  
 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:  (Candidate's signature) Date:

## SCHEDULE A: RECEIPTS

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.*

**(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
6/10/2015	Domenic Andreone 8635 Wilshire Blvd Beverly Hills, CA 90211	200	Retired
7/27/2015	George Beaugard 60 Longfellow Rd Holyoke, MA 01040	100	
9/2/2015	Richard Berrena 307 Linden St Holyoke, MA 01040	25	
9/8/2015	Richard Berrena 307 Linden St Holyoke, MA 01040	40	
5/27/2015	Lise Bourque 90 Lindor Heights Holyoke, MA 01040	40	
9/8/2015	Lise Bourque 90 Lindor Heights Holyoke, MA 01040	50	
6/1/2015	Peter Brady 39 Pitcher St Montgomery, MA 01085	100	
5/19/2015	Ernest Brunault 485 South St Holyoke, MA 01040	120	Retired
Sep 15, 2015	Ernest Brunault 485 South St Holyoke, MA 01040	100	Retired
6/4/2015	Monica Butler 419 Rogers Ave West Springfield, MA 01089	100	
6/1/2015	Odette Czapliski 8 Ivy Ave Holyoke, MA 01040	100	
5/27/2015	John Doyle 54 Longfellow Rd Holyoke, MA 01040	100	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>			← Enter on page 1, line 2

\* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5/22/2015	Jerome Gagliarducci 18 Stonington Dr Wilbraham, MA	100	
5/19/2015	Michael Gagliarducci 1056 N Pass Ave Burbank, CA 01505	200	Retired
5/19/2015	Paul Gagliarducci 15 South Ridge St Hampden, CT 01036	100	
6/26/2015	David Ladizki 46 Suffield St Agawam, MA	500	Attorney / Self Employed
5/19/2015	George Lynch 23938 Fairview Ct Farmington, MI 48335	100	
5/27/2015	Ann Mariani 41 Wendover Rd Suffield, CT 06078	100	
7/7/2015	Leo Mariani 3708 Travis Country Cir Austin, TX	250	Letter Sent
5/19/2015	Bonnie Pan 14 Alvord St South Hadley, MA 01075	100	
6/10/2015	Oscar Reyes 10 Robert Dr Holyoke, MA 01040	200	Owner / Reyes Auto Sales
5/22/2015	Richard Ryll 604 Main St Holyoke, MA 01040	500	Owner / Peerless Auto
Aug 19, 2015	William Schneeloch 6 Duane St Westfield, MA 01085	100	
5/2/2015	Jeff Stanek 11 Lindbergh Ave Holyoke, MA 01040	100	
5/19/2015	Alfred Trombley 20 Nichols Dr Holyoke, MA 01040	100	
Line 9: Total Receipts over \$50 (or listed above)		3,525	
Line 10: Total Receipts \$50 and under* (not listed above)		4,057	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		7,582	← Enter on page 1, line 2

\* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

## SCHEDULE B: EXPENDITURES

*M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.*

**(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
6/20/2015	Blessed Sacrament	21 Westfield Rd Holyoke, MA 01040	Sponsorship & Advertisement	140
Sep 10, 2015	Committe to Elect Fran O'Connell	PO Box 10698 Holyokoe, MA 01041	Campaign Contribution	100
5/21/2015	Dan Allie	38 Union St Westfield, MA	Bumper stickers & Yard signs	521.68
6/10/2015	Dan Allie	38 Union St Westfield, MA	Post Cards	425
6/23/2015	Dan Allie	38 Union St Westfield, MA	Bumper Stickers	181.6
7/16/2015	Dan Allie	38 Union St Westfield, MA	Yard Signs	335
8/28/2015	Dan Allie	38 Union St Westfield, MA	Lapel Stickers	220
9/1/2015	El Sol Latino	PO Box 572 Amherst, MA 01004	Advertisement	200
9/18/2015	First Choice Catering	9 Scott Hollow Dr Holyoke, MA 01040	Event Catering	758.62
6/11/2015	Hamel's Catering	555 Northampton St Holyoke, MA 01040	Event Catering	1,642.11
9/18/2015	Holyoke Elks Lodge	250 Whitney Ave Holyooke, MA 01040	Hall Rental	150
7/8/2015	Tiger Press	50 Industrial Dr East Longmeadow, MA 01028	Donation Envelopes	449.44
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → <b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				

\* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.





