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: 1/1/2015 Ending Date: 10/16/2015

Type of Report: (Check one)

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

Jennifer Chateauneuf
Candidate Full Name (if applicable)

City Councilor at Large
Office Sought and District

75 Hillview Road, Holyoke, MA 01040
Residential Address

Telephone Number (optional):

Cmte To Elect Jennifer Chateauneuf
Committee Name

Kate Prajzner (Formerly Rayko)
Name of Committee Treasurer

149 B Round Hill Road, Northampton, MA 01060
Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	$ 35.08
Line 2: Total receipts this period (page 3, line 11)	$ 5589.46
Line 3: Subtotal (line 1 plus line 2)	$ 5624.54
Line 4: Total expenditures this period (page 4, line 14)	$ 3307.92
Line 5: Ending Balance (line 3 minus line 4)	$ 2316.62
Line 6: Total in-kind contributions this period (page 6)	—
Line 7: Total (all) outstanding liabilities (page 7)	—
Line 8: Name of bank(s) used:	Holyoke Credit Union

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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: Katherine Prajzner (Treasurer's signature) Date: 10/26/15

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: 10/26/15

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)
May 2015	Action Plumbing and Heating, 17 Spring Meadow South Hadley, MA 01075	100.00	—
5/27/15	Luse and David Bourque 90 Lindor Heights Holyoke, MA 01040	100.00	—
8/4/15	Gossins Real Estate 79 King Street, Northampton MA 01060	100.00	—
10/5/15	IBPO Local 388 138 Appleton Street Holyoke, MA 01040	100.00	—
8/4/15	Shaun and Margaret Kelley, 16 Donkee Street Holyoke, MA 01040	100.00	—
8/4/15	Daniel Knapp 4 Glen Street, Holyoke MA 01040	100.00	—
6/1/15	Maureen O'Connell 15 Vassar Circle Holyoke, MA 01040	100.00	—
2/12/15	Edward and Mary Prazmo 15 Dillon Avenue, Holyoke MA 01040	100.00	—
4/11/15	Gary Rome 77 Salem Road Longmeadow, MA 01106	150.00	—
5/27/15	Kevin and Margaret Ross 6 Briarwood Drive Holyoke, MA 01040	100.00	—

Line 9: Total Receipts over $50 (or listed above)	1050.00
Line 10: Total Receipts $50 and under* (not listed above)	4539.46
Line 11: TOTAL RECEIPTS IN THE PERIOD	5589.46 ← 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
2/12/15	Jennifer Chateauneuf	75 Hillview Road Holyoke, MA 01040	reimbursement for tab at Francie's Tavern - Kickoff	74.50
7/16/15	Custom Magnets Direct	on-line	500 Campaign magnets	230.00
5/7/15	Dam Cafe	2014 Northampton Street Holyoke, MA 01040	down payment for venue for fundraiser	100.00
6/11/15	Dam Cafe	2014 Northampton Street Holyoke, MA 01040	tab at fundraiser	92.00
8/10/15	Dam Cafe	2014 Northampton Street Holyoke, MA 01040	balance owed for fundraiser	300.00
4/12/15	Greater Holyoke Chamber Centennial Foundation	PO Box 10691 Holyoke, MA 01041	Friends of Celebrate Holyoke Sponsorship	100.00
6/10/15	Holyoke Credit Union	490 Westfield Road Holyoke, MA 01040	withdrawal - starting kitty for fundraiser lockbox	100.00
7/23/15	Holyoke Signs + Designs	62 Main Street Holyoke, MA 01040	1 banner and 50 lawn signs	300.00
7/25/15	JP's Restaurant	200 Whiting Farms Road Holyoke, MA 01040	campaign meeting	71.30
9/17/15	JP's Restaurant	200 Whiting Farms Road Holyoke, MA 01040	Volunteer dinner	85.81
7/27/15	The Label Group	580 St James Avenue Springfield MA 01109	50 lawn signs	175.00
8/27/15	The Label Group	580 St. James Avenue Springfield, MA 01109	30 lawn signs	105.00

Line 12: Total Expenditures over $50 (or listed above)	→
Line 13: Total Expenditures $50 and under* (not listed above)	→
Line 14: TOTAL EXPENDITURES IN THE PERIOD	→

Enter on page 1, line 4 →

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

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
8/13/15	Longhorn Steakhouse	1105 Riverdale Street West Springfield, MA 01089	Campaign meeting	80.67
10/12/15	Longhorn Steakhouse	"	Campaign meeting	64.44
4/5/15	Providence Ministries	51 Hamilton Street Holyoke, MA 01040	golf hole sponsorship	100.00
5/21/15	USPS	Holyoke, MA 01040	stamps for fundraiser invites	98.00
5/5/15	Zazzle	on-line	100 Campaign buttons	122.89
5/8/15	Zazzle	on-line	250 Fundraiser invites	285.89
5/13/15	Zazzle	on-line	100 fundraiser invites	126.89

Line 12: Expenditures over $50 (or listed above)	2612.39
Line 13: Expenditures $50 and under* (not listed above)	695.53
Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD**	3307.92

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

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than $50. In-kind contributions $50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value

Line 15: In-Kind Contributions over $50 (or listed above)	
Line 16: In-Kind Contributions $50 & under (not listed above)	
Enter on page 1, line 6 → **Line 17: TOTAL IN-KIND CONTRIBUTIONS**	0

* If an in-kind contribution is received from a person who contributes more than $50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is $200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)** 0