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

10/25/2015

Reporting Period - Beginning: 1/1/2015 Ending: 10/16/2015

Type of report: Pre-election

Jon Lumbra	Committee to Elect Jon Lumbra
Full Name of Candidate	*Committee Name*
Ward 7 City Council	Patricia Lumbra
Office Sought/ District	*Name of Committee Treasurer*
15 Shepard Drive Holyoke, MA 01040	15 Shepard Drive Holyoke, MA 01040
Residential Address	*Committee Address*

SUMMARY BALANCE INFORMATION

Ending Balance from previous report:	$7,637.05
Total receipts this period:	$2,150.00
Subtotal:	$9,787.05
Total expenditures this period:	$2,605.75
Ending Balance:	$7,181.30
Total inkind contributions this period:	$0.00
Total outstanding liabilities:	$1,500.00
Name of bank(s) used: PeoplesBank	

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, inkind 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:

10/25/15

Treasurer's signature (in ink) **Date**

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, and 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 and attaches 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, inkind 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: 10/25/2015

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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.

Date	Name and Residential Address	Amount	Occupation and Employe
1/13/2015	Counter, John 47 Montgomery Ave Holyoke, MA 01040	$250.00	Letter Sent
9/4/2015	Gilbert Jr, Robert 33 Bretton Road West Springfield, MA 01089	$250.00	President Dowd Insurance Agency
9/6/2015	Hazen, Thomas 20 Bayan Drive, Apt. #130 South Hadley, MA 01075	$350.00	not employed not employed
9/4/2015	Ross, Kevin 6 Briarwood Drive Holyoke, MA 01040	$250.00	Treasurer Ross Insurance Agency
9/13/2015	Rosskothen, Peter 41 San Souci Drive South Hadley, MA 01075	$100.00	Manager Log Cabin/Delaney Hous
9/4/2015	Ross-O'Connell, Maureen 15 Vassar Circle Holyoke, MA 01040	$250.00	President Ross Insurance Agency
1/10/2015	Schmidt, Bellamy 661 West Cherry Street Holyoke, MA 01040	$500.00	Acting City Auditor City of Holyoke

Total Itemized Receipts	$1,950.00
Total Unitemized Receipts	$200.00
Total Receipts	$2,150.00

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 over $50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
10/7/2015	Hitchcock Press Po Box 803 Holyoke, MA 01041	$470.69	Letterhead and Envelopes
9/6/2015	Nationbuilder 520 S. Grand Ave Los Angels, CA	$29.00	Database Fee
10/6/2015	Nationbuilder 520 S. Grand Ave Los Angels, CA	$29.00	Database Fee
9/15/2015	Staples 1129 Riverdale Road West Springfield, MA 01089	$129.60	Office Supplies
8/15/2015	United States Postal Office Dwight Street Holyoke, MA 01041	$98.00	Stamps
10/6/2015	United States Postal Office Dwight Street Holyoke, MA 01041	$147.00	Stamps
10/8/2015	United States Postal Office Dwight Street Holyoke, MA 01041	$490.00	Stamps
8/6/2015	Victorystore 5200 30th St Sw Davenport, IA 52802	$521.50	Lawn Signs
10/6/2015	Vistaprint 95 Hayden Ave Lexington, MA 02173	$120.26	Invites
10/8/2015	Vistaprint 95 Hayden Ave Lexington, MA 02173	$93.99	Doorhangers
10/10/2015	Vistaprint 95 Hayden Ave Lexington, MA 02173	$357.46	Mailer

Date	Name and Address	Amount	Purpose
Total Itemized Expenditures		$2,486.50	
Total Unitemized Expenditures		$119.25	
Total Expenditures		$2,605.75	

Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind 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. An exception to this is that all contributions (under or over $50) given by persons who have contributed more than $50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of $200 or more in the calendar year.

Date	Name and Residential Address	Value	Description Occupation/Employer
Total Itemized Inkind Contributions		$0.00	
Total Unitemized Inkind Contributions		$0.00	
Total Inkind Contributions		$0.00	

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 the liabilities incurred during this reporting period.

Date	To Whom Due	Amount	Purpose
3/1/2013	Lumbra (Loan), Jon 15 Shepard Drive Holyoke, MA 01040	$1,500.00	Loan from candidate
Total Outstanding Liabilities		$1,500.00	