

Form CPF M 102: Campaign Finance Report JAN 2 ½ 2924 **Municipal Form**

Office of Campaign and Political Finance

Holyoke City Clerk's Holyoke, MA

| | File with: City or Town Clerk or Election Commission | | | | |
|---|--|--|--|--|--|
| Fill in Reporting Period dates: Beginning Date: Jan 1, | , 2023 Ending Date: Dec 31, 2023 | | | | |
| Type of Report: (Check one) | | | | | |
| | 30 day after election 🔀 year-end report 🗌 dissolution | | | | |
| Todd MCGEE | Mcgee Committee | | | | |
| Candidate Full Name (if applicable) | Committee Name Kelly Lecles C | | | | |
| Office Sought and District 30 Mehlow Vi ew Rd | Name of Committee Treasurer 489 Hillside Ave | | | | |
| Residential Address E-mail: mcgeefod) (0 yghov. Com | E-mail: Mailing Address E-mail: Mailing Address E-mail: Mailing Address E-mail: Mailing Address | | | | |
| Phone # (optional): (413) 262-5895 | Phone # (optional): (113) 210 - 531/ | | | | |
| | | | | | |
| SUMMARY BALANC | E INFORMATION: | | | | |
| Line 1: Ending Balance from previous report | 3,179 Fw | | | | |
| Line 2: Total receipts this period (page 3, line 11) | 0.00 | | | | |
| Line 3: Subtotal (line 1 plus line 2) | 3,179.3700 | | | | |
| Line 4: Total expenditures this period (page 5, line | 780 - | | | | |
| Line 5: Ending Balance (line 3 minus line 4) | 2,399 700 | | | | |
| Line 6: Total in-kind contributions this period (page | ge 6) 00 | | | | |
| Line 7: Total (all) outstanding liabilities (page 7) | 4,272 45,00 | | | | |
| Line 8: Name of bank(s) used: | Bank | | | | |
| Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best | | | | | |
| activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind c finance activity of all persons acting under the authority or on behalf of Alis committee in a | | | | | |
| Signed under the penalties of perjury: Killy Killiz (Treasurer's signature) Date: 1-22-24 | | | | | |
| FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) | | | | | |
| Candidate with 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 that are not otherwise disclosed in this report. | | | | | |
| Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, dispursements, campaign finance activity of all persons acting under the authority or on behalf of this | in-kind contributions and liabilities for this reporting period and represents the | | | | |
| Signed under the penalties of perjury; | (Candidate's signature) Date: 1 20 2 | | | | |

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) |
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| Line 9: Total Rece | ipts over \$50 (or listed above) | | |
| Line 10: Total Rece | eipts \$50 and under* (not listed above) | | |
| Line 11: TOTAL 1 | RECEIPTS IN THE PERIOD | 0.00 | ← 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) |
|---------------------|--|--------|---|
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| Line 9: Total Recei | pts over \$50 (or listed above) | 0 | |
| Line 10: Total Rece | ipts \$50 and under* (not listed above) | 0 | |
| | ECEIPTS IN THE PERIOD | L | Enter on page 1, line 2 d include only those receipts not itemized above. |

^{*} 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.)

| report all expenditures. Please include your committee name and a page number on each page.) | | | | | |
|--|---|--------------------------------|-------------|--------|--|
| | To Whom Paid | | | | |
| Date Paid | (alphabetical listing) | Address Purpose of Expenditure | | Amount | |
| 9/14 | Comm to Elect Devine | | Campaign | \$100 | |
| 917 | Comm to Elect Learly | | Campaigh. | £ 100 | |
| 12/22 | Fame | | Holilyta | 1 60 | |
| 110 | 1401yoke St PAHS COMM | | Ads | 475 | |
| 5/10 | JACL & Jill O SUMINM | | Jade S. J.M | \$ 100 | |
| 4/21 | storming Te Oncer | | 6dF/A) | 8120 | |
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| , | 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 → Line 14: TOTAL EXPENDITURES IN THE PERIOD * If you have itemized expenditures of \$50 and under include them in line 12. Line 13 should include only these expenditures not itemized. | | | | | |

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

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SCHEDULE B: EXPENDITURES (continued)

| | To Whom Paid | | | | |
|---|--|--|---|--------|--|
| Date Paid | (alphabetical listing) | Address Purpose of Expenditu | | Amount | |
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| Line 12: Expenditures over \$50 (or listed above) | | | 600 | | |
| | Line 13: Expenditures \$50 and under* (not listed above) | | | 180 | |
| | | | | | |
| Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD 780 and under include them in line 12. Line 13 should include only those expenditures not itemized | | | | | |

^{*} 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 | Value | | |
|--|---------------------------|--|-----------------------------|---|--|
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| The following states of the st | | | | | |
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| | | Line 15: In-Kind Contributions | over \$50 (or listed above) | Ø | |
| | | Line 16: In-Kind Contributions \$50 & under (not listed above) | | | |
| | Enter on page 1, line 6 → | → Line 17: TOTAL IN-KIND CONTRIBUTIONS | | | |

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^{*} 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 |
|-------------------------|---------------------------|-------------------------|------------------------|-------------|
| 1-1-05 to present | TOOD MOGEE | 30 Mendowich Road | loan | L1, 272, 10 |
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| - | Enter on page 1, line 7 → | Line 18: TOTAL OUTSTANI | DING LIABILITIES (ALL) | 4,272 45 |