



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: Jan 1, 17 Ending Date: Oct 20, 17

Type of Report: (Check one)

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

Michael J. Sullivan
Candidate Full Name (if applicable)
CITY COUNCILOR AT LARGE
Office Sought and District
43 PARK SLOPE, HOLYOKE, MA
Residential Address
Telephone Number (optional): _____

CMTE TO ELECT MICHAEL J. SULLIVAN
Committee Name
EFRAIN SUAREZ
Name of Committee Treasurer
Committee Mailing Address
Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

| | |
|--|----------------------------|
| Line 1: Ending Balance from previous report | <u>\$196.00</u> |
| Line 2: Total receipts this period (page 3, line 11) | <u>4,005.⁰⁰</u> |
| Line 3: Subtotal (line 1 plus line 2) | <u>4,201.⁰⁰</u> |
| Line 4: Total expenditures this period (page 5, line 14) | <u>1,575.⁴⁸</u> |
| Line 5: Ending Balance (line 3 minus line 4) | <u>2,625.⁵²</u> |
| Line 6: Total in-kind contributions this period (page 6) | <u>0</u> |
| Line 7: Total (all) outstanding liabilities (page 7) | <u>2,145.⁶⁴</u> |
| Line 8: Name of bank(s) used: | <u>HOLYOKE CREDIT UN</u> |

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CITY OF HOLYOKE
CITY CLERKS OFFICE

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: 10/20/17

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.

Candidate without 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, 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: Michael J. Sullivan (Candidate's signature) Date: 10/30/17

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) |
|--|---|---------------------|---|
| 10/10/17 | CARLETON, TERRENCE 285 FOX HILL RD. NEEDHAM, MA 02492 | 500 ⁰⁰ | VP / U.B.S. BOSTON & HADLEY MILLS, LLC |
| 9/1/17 | KADENS, PETER 2630 N. PAULINA CHICAGO, ILL 60614 | 800 ⁰⁰ | EXEC. GTI INVESTMENTS LLC |
| 9/5/17 | KOVLER, BEN 875 N. MICH STZ 3400 CHICAGO, ILL 60611 | 800 ⁰⁰ | EXEC GTI |
| 7/0/5/17 | PARTYKA, JOSEPH 495 SPALD ST CHICOPEE, MA 01013 | 500 ⁰⁰ | RETIRED |
| 10/12/17 | REYES-COLON, V&G 46 BROWN AVE HOLYOKE, MA | 60 ⁰⁰ | N/A |
| 10/12/17 | SACENTI, MIKE BOX 833 E. LONGMEADOW, MA | 75 ⁰⁰ | N/A |
| 10/6/17 | SCHWARTZ, BEN 71 LOCKS VILLAGE RD, WENDELL, MA 01379 | 250 ⁰⁰ | OWNER / FLOOD POWER LLC |
| 10/11/17 | SZOSTKIEWICZ, KAROL 73 SAN SOUCL. DR. S. HADLEY, MA 01075 | 300 ⁰⁰ | RETIRED |
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| | | | |
| Line 9: Total Receipts over \$50 (or listed above) | | 3,285 ⁰⁰ | |
| Line 10: Total Receipts \$50 and under* (not listed above) | | 720 ⁰⁰ | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | 4,005 | ← 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 |
|--|--|--|--------------------------------------|---------------------------|
| 9/19/17 | DURHAM BUS | JACKSON SOUTH ST HOLYOKE, MA | BUSSES FOR YOUTH TEAMS @ HOLYOKE DAY | 360 ⁰⁰ |
| 9/21 | WMASS/USSA SOFTBALL LEAGUE | | ADVERTISING | 600 ⁰⁰ |
| 10/19 | HOMEWORK HOUSE | | COMMUNITY INVOLVEMENT | 500 ⁰⁰ |
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| Line 12: Total Expenditures over \$50 (or listed above) | | | | 1,460 ⁰⁰ |
| Line 13: Total Expenditures \$50 and under* (not listed above) | | | | 115 ⁴⁰ |
| Line 14: TOTAL EXPENDITURES IN THE PERIOD | | | | 1,575⁴⁰ |

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. Page 3

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

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 |
|---------------------------|-------------|--|---|---------------------|
| 10/19/17 | TIGER PRESS | 50 IND. DR. E. LONGMEADOW MA 01028 | PRINT & MAIL | 2,145 ⁶⁴ |
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| Enter on page 1, line 7 → | | | Line 18: TOTAL OUTSTANDING LIABILITIES (ALL) | 2,145 ⁶⁴ |