



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: 2019 OCT 21 Beginning Date: Jan 1, 2019

Ending Date: Oct 18, 2019

Type of Report: (Check one) CITY OF HOLYOKE  
CITY CLERK'S OFFICE

☐ 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 01040

Residential Address

E-mail: MIKE.SULLY53@YAHOO.COM

Phone # (optional):

COMTE TO ELECT MIKE SULLIVAN

Committee Name

EFRAIN SUAREZ

Name of Committee Treasurer

43 PARK SLOPE HOLYOKE MA  
01040

Committee Mailing Address

E-mail:

Phone # (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>70.6</u>
Line 2: Total receipts this period (page 3, line 11)	<u>1,950<sup>00</sup></u>
Line 3: Subtotal (line 1 plus line 2)	<u>1,120<sup>60</sup></u>
Line 4: Total expenditures this period (page 5, line 14)	<u>950<sup>00</sup></u>
Line 5: Ending Balance (line 3 minus line 4)	<u>170<sup>60</sup></u>
Line 6: Total in-kind contributions this period (page 6)	<u>Ø</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>Ø</u>
Line 8: Name of bank(s) used:	<u>HOLYOKE CREDIT UNION</u>

### 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:

Efrain Suarez (Treasurer's signature)

Date: 10/28/19

### 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 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Michael J. Sullivan (Candidate's signature)

Date: 10/28/19

## 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)
8/5/19	JOHN AUBIN 42 CLINTON AVE. HOLYOKE, MA 01040	250 <sup>00</sup>	OWNER - OPEN SQUARE
8/5/19	MARC POIRIER 9 CHALK ST CAMBRIDGE MA 01239	200 <sup>00</sup>	OWNER - LONLEAF LUMBER
10/10/19	CLARK WOJOWICZ 295 CHILOPEE ST. CHILOPEE, MA 01013	500 <sup>00</sup>	OWNER - RMY'S TRUCKING
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)		100 <sup>00</sup>	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1050 <sup>00</sup>	← 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
9/16	H.S. FALL LEAGUE		SPONSORSHIP/ DONATION	450 <sup>00</sup>
10/10	HOMEWORK HOUSE		SPONSORSHIP/ DONATION	500 <sup>00</sup>
			Line 12: Total Expenditures over \$50 (or listed above)	950 <sup>00</sup>
			Line 13: Total Expenditures \$50 and under* (not listed above)	Ø
Enter on page I, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	950 <sup>00</sup>

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