



Commonwealth  
of Massachusetts

**Form CPF M 102: Campaign Finance Report  
Office of Campaign and Political Finance**

RECEIVED  
 15 OCT 26 PM 2:04  
 CITY OF HOLYOKE  
 CITY CLERK'S OFFICE

File with:  
City or Town Clerk or Election Commission

Reporting Period: Beginning: 1/1/2014 Ending: 10/25/2015

Type of Report: Pre-election

**Mimi Panitch**  
 Full Name of Candidate  
**City Council/Holyoke**  
 Office Sought/ District  
**134 Madison Ave**  
**Holyoke, MA 01040**  
 Residential Address

**Committee to Elect Mimi Panitch**  
 Committee Name  
**Stephen OBrien**  
 Name of Committee Treasurer  
**6 Amherst Street**  
**Holyoke, MA 01040**  
 Committee Address

**SUMMARY BALANCE INFORMATION**

Ending balance from previous report:	\$1,801.83
Total receipts this period:	\$2,640.00
Subtotal:	\$4,441.83
Total expenditures this period:	\$4,228.58
Ending Balance:	\$213.25
Total inkind contributions this period:	\$0.00
Total outstanding liabilities:	\$0.00
Name of Bank Used:	Peoples

**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:

*Stephen D. O'Brien*  
 Treasurer's signature (in ink)

*25 Oct 2015*  
 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 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, 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:

*Mimi Panitch*  
 Candidate's signature (in ink)

*October 25, 2015*  
 Date

## 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 Employer
10/21/2015	Alexander, Gordon 1021 Northampton Street Holyoke, MA 01040	\$100.00	Retail Self Employed
10/21/2015	Barrett, Lora 113 Dartmouth St Holyoke, MA 01040	\$100.00	Professor Umass
9/28/2015	Creed, Tom 2 Pheasant Dr Holyoke, MA 01040	\$100.00	
10/19/2015	Epstein, John 52 Harvard Street Holyoke, MA 01040	\$200.00	Marketing Self Employed
10/21/2015	Levin, Andrew 74 Fairfield Ave Holyoke, MA 01040	\$100.00	Medicine Physician
10/9/2015	O'Brien, Stephen - Loan 6 Amherst Street Holyoke, MA 01040	\$490.00	Professor Westfield State Univer
8/14/2015	Panitch, Deborah 16 Pheasant Dr. Holyoke, MA 01040	\$500.00	General Surgeon Holyoke Medical Center
10/6/2015	Panitch, Victor 134 Madison Ave Holyoke, MA 01040	\$500.00	Medicine Holyoke Medical Center
9/28/2015	Reidy, Roger 6 Pheasant Dr. Holyoke, MA 01040	\$100.00	H/VAC Reidy Heatling
10/21/2015	Robinson, Martha 1021 Northampton Street Holyoke, MA 01040	\$100.00	Retired
9/28/2015	Smith, Fred Pheasant Dr Holyoke, MA 01040	\$100.00	
<b>Total Itemized Receipts:</b>		<b>\$2,390.00</b>	
<b>Total Unitemized Receipts:</b>		<b>\$250.00</b>	
<b>Total Receipts:</b>		<b>\$2,640.00</b>	

## 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
10/21/2015	Andrew Associates 6 Pearson Way Enfield, CT 06082	\$1,578.00	Postage For Brochures
10/19/2015	BB Designs 273 Williams St Longmeadow, MA 01106	\$400.00	Political Trifold Mailer
2/25/2014	M. Panitch 134 Madison Ave Holyoke, MA 01040	\$75.00	Reimbursement (See R1)
10/9/2015	Signrocket 340 Broadway St. Paul,, MN 55071	\$490.00	Campaing Signs with Credit Card
10/9/2015	Steve O'Brien 6 Amherst Street Holyoke, MA 01040	\$490.00	Reimbursement for signs
10/19/2015	Yankee Printing 630 New Ludlow Road South Hadley, MA 01075	\$1,195.58	Brochures
<b>Total Itemized Expenditures:</b>		<b>\$4,228.58</b>	
<b>Total Unitemized Expenditures:</b>		<b>\$0.00</b>	
<b>Total Expenditures:</b>		<b>\$4,228.58</b>	