

## Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

			File w	ith: City or Town Clerk o	r Election Commission
Fill in Repo	orting Period dates: Beginning Date: Jan 1	, 2019	Ending Date:	Oct 18, 2019	
	- Company of the Comp				
Type of Re	eport: (Check one)				
8th day p	receding preliminary 🔀 8th day preceding election	☐ 30 day	after election	year-end report	dissolution
		The	Committee to Elec	t Nelson Lonez	
Nelson Lopez	Z	11100	***************************************		
	Candidate Full Name (if applicable)			mmittee Name	•
City Councilo	or At-Large	Cath	erine Gonzales		
	●ffice Sought and District			Committee Treasurer	
3 Shamut Av	ve. Holyoke, MA 01040	41 W	est Summit, #54,		A 01075
	Residential Address			tee Mailing Address	
E-mail: netso	onl r@comcast.net	E-mail:	kitcat0298@gmail.cor	n	
Phone # (options	al):	Phone # (	optional):		
		1			
	SUMMARY BALANC	CE INFO	RMATION:		
	Line 1: Ending Balance from previous report		0.00		
	Line 1: Ending Balance from previous report	- :	0.00		
	Ying 2. Total respirits this period (page 2. line 1)	`	883.67		
	Line 2: Total receipts this period (page 3, line 11	,	883.07	<u> </u>	1
	Time 2. Cultotal (line 1 who line 2)		883.67		1
	Line 3: Subtotal (line 1 plus line 2)		003.07		]
	T	1.0	044.33	그는 등	
	Line 4: Total expenditures this period (page 5, lin	ne 14)	844.32		
	Triangle But and the Aller All		39.35	Fro H	1 4)
	Line 5: Ending Balance (line 3 minus line 4)		37.33	77 W	1 98%
			0.00		T conso
	Line 6: Total in-kind contributions this period (p	age o	0.00	on Co. To	1 1/4/1000 N
	T		0.00	710	
	Line 7: Total (all) outstanding liabilities (page 7)		0.00	11 July 1	
	Line 8: Name of bank(s) used: Holyoke Credi	it I Inion		<u>ال ال</u>	1
	Line 8: Name of bank(s) used: Horyoke Credi	it Ollion			]
	mmittee Treasurer: ive examined this report including attached schedules and it is, to the bes	r of my know	ladas and belief a taxe and	complete statement of all	campaign finance
cerary maci na ctivity, includin	re examined this report including attached schedules and it is, to the best of all contributions, loans, receipts, expenditures, disbursements, in-kind	contributions	and liabilities for this repo	rting period and represent	s the campaign
inance activity o	of all persons acting under the authority or on behalf of this committee in	n accordance v	with the requirements of M	.G.L. c. 55.	
igned under th	ne penalties of perjury: ( TILLIA L POM Se	Ulva_	(Treasurer's sign	ature) Date: )(	12512019
	TO A TO THE WOOD ON THE				
OR CAND	IDATE FILINGS ONLY: Affidavit of Candidate: (check 1 b	ox only)			
/ Candidate	with Committee				
	It have examined this report including attached schedules and it is, to the				
	all persons acting under the authority or on behalf of this committee in a y liabilities nor made any expenditures on my behalf during this reporting				ved any contributions,
in een viitee		O Provide Brief (			
	without Committee t I have examined this report including attached schedules and it is, to the	e best of my l	knowledge and belief a true	e and complete statement	of all campaign
finance acti	vity, including contributions, loans, receipts, expenditures, disbursement	ts, in-kind con	tributions and liabilities fo	r this reporting period and	
campaign fi	inance activity of all persons acting under the authority or or behalf of the	nis candidate i	n accordance with the requ	irements of M.G.L. c. 55.	1.01-
			10 ata	Date: _/	0/28/19
signed under th	he penalties of perjury:		(Candidate's sign	nature) —	7 7

## 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)
6/26/19	Mary Birks 63 Taylor St., Holyoke, MA 01040	50.00	
9/18/19	Mary Birks 63 Taylor St., Holyoke, MA 01040	50.00	
9/4/19	Patricia Duffy 18 Florence Ave., Holyoke, MA 01040	50.00	
10/8/19	Nelson Lopez 3 Shawmut Ave., Holyoke, MA 01040	300.00	Staff Assistant Holyoke Community College
10/18/19	Nelson Lopez 3 Shawmut Ave. Holyoke, MA 01040	200.00	Staff Assistant Holyoke Community College
9/18/19	Vanessa Martinez 38 Edbert Drive, Holyoke, MA 01040	60.00	
9/16/19	Sue Ellen Panitch 134 Madison Ave., Holyoke, MA 01040	100.00	
		-	
Line 9: Total Receipts over \$50 (or listed above)		810.00	
ine 10: Total Rec	ceipts \$50 and under* (not listed above)	73.67	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	883.67	← Enter on page 1, line 2

## 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 D 13	To Whom Paid	Address Purpose of Expenditure Amou		
Date Paid	(alphabetical listing)	Address	rurpose of Expenditure	Amount
10/9/19	BuildASign.com	11525A Stonehollow Dr. Suite 100, Austin, TX 78758	Lawn Signs	345.84
9/17/19	Capri Pizza	18 Cabot St. Holyoke, MA 01040	Food for meet & greet event.	90.00
9/16/19	Quick Stop Printing	340 Shrewsbury St. Worcester, MA 01604	Palm Cards	100.94
10/16/19	Quick Stop Printing	340 Shrewsbury St. Worcester, MA 01604	Palm Cards	281.57
		Line 12: Total Expenditures or	818.35	
		Line 13: Total Expenditures \$5	25.97	
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD 8				

<sup>\*</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. Page 4

## 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
				:
			-	
<u> </u>		Line 15: In-Kind Contribution		
		Line 16: In-Kind Contributions \$50 & under (not listed above)		0.00
		Line 17: TOTAL IN-KIND	CONTRIBUTIONS	0.00

<sup>\*</sup> 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.

Page 6