



Commonwealth  
of Massachusetts

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

File with: Director  
Office of Campaign and Political Finance  
One Ashburton Place Rm. 411  
Boston, MA 02108  
(617) 979-8300

CPF ID# 16703

Reporting Period: Beginning: 1/1/2022 Ending: 12/31/2022

Type of Report: 2022 Year-end Report

**Siciliano, Michael Thomas**

*Full Name of Candidate*

**Municipal, Local Filer**

*Office Sought/ District*

**(Deceased)  
, MA**

*Residential Address*

**Siciliano Committee**

*Committee Name*

**David Yos**

*Name of Committee Treasurer*

**287 High Street, Suite 319  
Holyoke, MA 01040**

*Committee Address*

**SUMMARY BALANCE INFORMATION**

Ending balance from previous report:	\$150.53
Total receipts this period:	\$0.00
Subtotal:	\$150.53
Total expenditures this period:	\$0.00
Ending Balance:	\$150.53
Total inkind contributions this period:	\$0.00
Total out of pocket spending this period:	\$0.00
Total outstanding liabilities:	\$1,965.71
Name of Bank Used:	Peoples Bank

**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:

*David Yos*

*1/19/2023*

Treasurer's signature (in ink)

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, 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:

## 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 the liabilities incurred during this reporting period.

<u>Date</u>	<u>To Whom Due</u>	<u>Reduction</u>	<u>Loan Amount</u>	<u>Purpose</u>
12/31/2021	<b>Holyoke Creative Arts Center</b> 384a Dwight Street Holyoke, MA 01040		\$56.25	
12/31/2021	<b>Siciliano, Michael Thomas</b> (Deceased) MA		\$1,503.83	
12/31/2021	<b>Yos, David</b> 20 Sydney Avenue Holyoke, MA 01040		\$405.63	
	<b>Outstanding Liabilities:</b>		<b><u>\$1,965.71</u></b>	