



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

CITY CLERK
CITY OF PITTSFIELD, MA
RECEIVED

2015 OCT 16 P 2:00

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Ending Date:

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Candidate Full Name (if applicable)

Office Sought and District

Residential Address

Telephone Number (optional):

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<input type="text" value="1,353.17"/>	✓
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="1,105.00"/>	✓
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="2,458.17"/>	✓
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="897.10"/>	✓
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="1,561.07"/>	✓
Line 6: Total in-kind contributions this period (page 6)	<input type="text" value="0"/>	
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text" value="0"/>	
Line 8: Name of bank(s) used:	<input type="text" value="TD 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, 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: *Diane Simonelli* (Treasurer's signature) Date:

FOR CANDIDATE FILINGS ONLY: 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 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 OR Candidate with independent activity filing separate report
 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.

Anthony J. Simonelli

10/17/15

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)
6/26/15	JAMES SULLIVAN 40 KELLIE DRIVE PITTSFIELD, MA 01201	100.00	
Line 9: Total Receipts over \$50 (or listed above)		100.00	✓
Line 10: Total Receipts \$50 and under* (not listed above)		1,005.00	✓
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,105.00	← 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 Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/11/15	BIG DADDY SIGNS	P O BOX 783634 WINTER GARDEN, FL 34778	15 LAWN SIGNS	190.73
9/26/15	BIG DADDY SIGNS	P O BOX 783634 WINTER GARDEN, FL 34778	15 LAWN SIGNS	190.73
9/15/15	FRIENDS GRILLE	17 SEYMOUR STREET PITTSFIELD, MA 01201	FOODFOR FUNDRAISER	267.50
Line 12: Total Expenditures over \$50 (or listed above)				648.96
Line 13: Total Expenditures \$50 and under* (not listed above)				248.14
Line 14: TOTAL EXPENDITURES IN THE PERIOD				897.10

Enter on page 1, line 4 →