Commonwealth of Massachusetts

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TOWN OF EAST LONGMEADOW

Form CPF M 102: Campaign Finance Report
Municipal Form

Office of Campaign and Political Finance

TOWN OF EAST LONGMEADOW

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01-01-16 Ending Date: 05-30-16

Type of Report: (Check one)

☐ 8th day preceding preliminary ☑ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

KATHLEEN G. HILL Candidate Full Name (if applicable)	COMMITTEE TO ELECT KATHLEEN HILL Committee Name
TOWN COUNCIL EAST LONGMEADOW Office Sought and District	BRENDA S. HOULE Name of Committee Treasurer
222 KIBBE RD Residential Address	222 KIBBE RD. EAST LONGMEADOW Committee Mailing Address
Telephone Number (optional): 413-525-2564	Telephone Number (optional): 413-525-2564

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	1461 33
Line 3: Subtotal (line 1 plus line 2)	1461 33
Line 4: Total expenditures this period (page 5, line 14)	543 33
Line 5: Ending Balance (line 3 minus line 4)	918 00
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	261 33
Line 8: Name of bank(s) used:	PREMIER SOURCE CREDIT UNION

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: Brenda S. Houle (Treasurer's signature) Date: 5/27/16

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.

Signed under the penalties of perjury: Kathleen G. Hill (Candidate's signature) Date: 5/27/16

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)
05/08/16	LAURIE G. DUSEL 116 WAVERLY RD. LUDLOW, MA 01056	100 00	
05/23/16	JUDITH A. FLETCHER 35 NEW SOUTH ST. APT. 209 NORTHAMPTON, MA	100 00	
05/24/16	PATRICIA HAFEY 115 ELM ST E. LONGMEADOW, MA 01028	150 00	
05/03/16	JENNIFER C. HILL 10 HILLSIDE DR. E. LONGMEADOW, MA 01028	100 00	
04/22/16	KATHLEEN G. HILL 222 KIBBE RD. E. LONGMEADOW, MA 01028	250 00	RETIRED EDUCATIONAL CONSULTANT NEW ENGLAND LEAGUE OF MIDDLE SCHOOLS
05/16/16	KATHLEEN HILL (LOAN)	85 00	
05/10/16	KATHLEEN HILL (LOAN)	129 97	
4/20/16 5/10/16	KATHLEEN HILL (LOAN)	46 36	
05/25/16	CATHY A. HOOD 505 CHESTNUT ST E. LONGMEADOW, MA 01028	175 00	
05/25/16	PAMELA HOOD 103 MANOR CT SPRINGFIELD, MA 01118	25 00	
05/04/16	BRENDA S. HOULE 106 E RIDGEFIELD CIR CLINTON, MA 01510	100 00	
05/10/16	KELLY H. OBRIEN 70 RIDGEWOOD RD. GLASTONBURY, CT	200 00	REGISTERED NURSE CONN. CHILDRENS MEDICAL CENTER, HARTFORD, CT
Line 9: Total Receipts over $50 (or listed above)		1461.33	
Line 10: Total Receipts $50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		$1461.33	← 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
05/26/16	REMINDER PUBLICATIONS	280 N. MAIN ST. E. LONGMEADOW, MA	POLITICAL AD 5/26/16 ISSUE	282.00
05/16/16	STAPLES, INC.	433 N. MAIN ST. E. LONGMEADOW, MA	COPY CHARGES FOR 200 FLYERS FOR CANDIDATES FORUM	85.00
05/10/16	VISTAPRINT.COM	VENLO, THE NETHERLANDS	1000 POSTCARDS FOR DIRECT DOOR MAIL	129.99

Line 12: Total Expenditures over $50 (or listed above)	496.99
Line 13: Total Expenditures $50 and under* (not listed above)	46.34
Line 14: TOTAL EXPENDITURES IN THE PERIOD	$543.33

Enter on page 1, line 4 →

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

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

	Line 15: In-Kind Contributions over $50 (or listed above)	0
	Line 16: In-Kind Contributions $50 & under (not listed above)	0
Enter on page 1, line 6 →	**Line 17: TOTAL IN-KIND CONTRIBUTIONS**	0

* 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.

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 those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
05/10/16	KATHLEEN HILL	222 KIBBE RD. EAST LONGMEADOW, MA	REIMBURSEMENT FOR POSTCARDS FROM VISTAPRINT.COM	129.91
05/16/16	KATHLEEN HILL	222 KIBBE RD EAST LONGMEADOW, MA	REIMBURSEMENT FOR PHOTOCOPY CHARGES FROM STAPLES	85.00
04/20/16 05/10/16	KATHLEEN HILL	222 KIBBE RD EAST LONGMEADOW, MA	REIMBURSE FOR MISC. CAMPAIGN SUPPLIES	46.36

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)** $261.33