

# Form CPF M102

## Office of Campaign and Political Finance

CITY CLERK'S OFFICE

2011 JAN 11 P 3:21

File With:  
City or Town Clerk or Election Commission

Report Period Beginning 1/1/2010 Ending: 12/31/2010

Type of Report: Year-end

**Chuck Swider***Full Name of Candidate***Alderman/Ward 2***Office Sought/District***34 Baril Lane, Chicopee, MA 01013***Residential Address***Committee to Elect Chuck Swider***Committee Name***Thomas Minerich***Name of Committee Treasurer***78 West Street, Chicopee, MA 01013***Committee Mailing Address*

### Summary Balance Information

Line 1: Ending Balance from previous report	\$5,116.44
Line 2: Total receipts this period (Schedule A)	\$0.00
Line 3: Subtotal (line 1 plus line 2)	\$5,116.44
Line 4: Total expenditures this period (Schedule B)	\$1,015.77
Line 5: Ending balance from (line 3 minus line 4)	\$4,100.67
Line 6: Total in-kind contributions this period (Schedule C)	\$0.00
Line 7: Total (all) outstanding liabilities (Schedule D)	\$0.00
Line 8: Name(s) of bank(s) used:	<b>Chicopee Savings Bank</b>

#### 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 and 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:



Treasurer's Signature (in ink)

Jan 12 - 2011

Date

#### Affidavit of Candidate (check 1 box only)

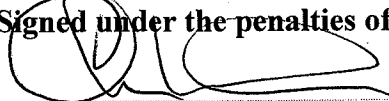
 Candidate with committee and no activity independent of the committee

*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, 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:



Candidate's Signature (in ink)

Date

Jan 12 2011

Reimbursements

Credit Cards

## 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.

<u>Date</u>	<u>Name and residential address</u>	<u>Amount</u>	<u>Occupation and Employer</u>
		\$0.00	
<b>9. Total Receipts in excess of \$50 or listed above</b>		<b>\$0.00</b>	
<b>10. Total Receipts \$50 and under</b>		<b>\$0.00</b>	
<b>11. Total Receipts in the period</b>		<b><u>\$0.00</u></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.

<u>Date</u>	<u>Name and residential address</u>	<u>Amount</u>	<u>Purpose</u>
1/18/2010	Chuck Swider , MA	\$475.77	Reimbursement (See R1)
6/16/2010	committee To Elect Steve Buoniconti , MA	\$100.00	Campaign Donation
5/11/2010	Committee to Reelect Thomas Petrolati 106 Stevens Street Ludlow, MA 01056	\$100.00	Campaign Donation
9/10/2010	Galvin Committee , MA	\$100.00	Donation
5/11/2010	Johnny Yee Scholarship Fund 705 Memorial Dr, Suite 200 Chicopee, MA 01020	\$100.00	Charity Donation
2/19/2010	St. Patrick Parada Committee , MA	\$65.00	Donation
<b>9. Total Expenditures in excess of \$50 or listed above:</b>		<b>\$940.77</b>	
<b>10. Total Expenditures \$50 and under:</b>		<b>\$75.00</b>	
<b>11. Total Expenditures in the period</b>		<b><u>\$1,015.77</u></b>	

## 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. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

<u>Date</u>	<u>Name and residential address</u>	<u>Amount</u>	<u>Description/Occupation and Employer</u>
		\$0.00	
<b>9. Total In-kind Receipts in excess of \$50 or listed above:</b>		<b>\$0.00</b>	
<b>10. Total In-kind Receipts \$50 and under:</b>		<b>\$0.00</b>	
<b>11. Total Receipts in the period</b>		<b><u>\$0.00</u></b>	

## 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 Incurred</u>	<u>To Whom Due</u>	<u>Amount</u>	<u>Purpose</u>
		\$0.00	
	<b>18. Total liabilities (ALL)</b>	<b>\$0.00</b>	

## Schedule R: Reimbursements

The following is a list of all reimbursements issued during the relevant reporting period. This schedule only contains summary information, please review the individual R-1 form to see the detail of the reimbursement.

<b>Date</b>	<b>Reimbursee</b>	<b>Amount</b>
1/18/2010	<u>Swider, Charles</u>	\$475.77
Total Reimbursements		\$475.77