



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/25 Ending Date: 09/01/25

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

Michele Ronco
Candidate Full Name (if applicable)
City Councilor - Ward 1
Office Sought and District
201 N Elm St., Northampton MA, 01060
Residential Address
E-mail: **michele.ronco@gmail.com**
Phone #: **413-314-0108**

Committee to Elect Michele Ronco
Committee Name
Julia B. Asborsen
Name of Committee Treasurer
201 N Elm St., Northampton, MA 01060
Committee Mailing Address
E-mail: **jbasborsen@gmail.com**
Phone #: **413-695-2015**

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	n/a
Line 2: Total receipts this period (page 3, line 12)	\$1,210.00
Line 3: Subtotal (line 1 plus line 2)	\$1,210.00
Line 4: Total expenditures this period (page 5, line 15)	\$461.99
Line 5: Ending Balance (line 3 minus line 4)	\$748.01
Line 6: Total in-kind contributions this period (page 6, line 18)	\$0
Line 7: Total (all) outstanding liabilities (page 7, line 19)	\$0
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	\$0
Line 9: Name of bank(s) used:	Florence 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: Julia B. Asborsen (Treasurer's signature) Date: 9/3/2025

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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 that are not otherwise disclosed in this report.

Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Michele Ronco (Candidate's signature) Date: 9/3/2025

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities. *Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.*

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
7/22/2025	Asbomsen, Julia 125 Chestnut St. Florence, MA 01062	\$10.00	
7/22/2025	Bench, Nathan 24 Depot Rd Hatfield, MA 01038	\$50.00	
8/26/2025	Cahillane, Robert P. 377 Prospect St. Northampton, MA 01060	\$25.00	not employed/not employed
8/19/2025	Cathro, Charlotte 71 Pine Street Florence, MA 01062	\$100.00	CPA, Self-employed
8/05/2025	Clooney, Amber 984 East Pleasant St. Amherst, MA 01002	\$50.00	
8/12/2025	Goodman, Ian 90 Franklin St. Northampton, MA 01060	\$50.00	M.D., Baystate Medical Center
8/19/2025	Maciborski, Melissa A. 406 Acrebrook Drive Northampton, MA 01062	\$500.00	Pediatrician, PAM
8/12/2025	McNally, Cathy 2 Gleason Road Northampton, MA 01060	\$50.00	
8/12/2025	Nye, Jennifer 250 South Street Northampton, MA 01060	\$25.00	Professor, UMass Amherst
8/01/2025	Rigano, Paula 45 Finn St. Northampton, MA 01060	\$50.00	
8/19/2025	Smith, Nancy 48 Chapel St. Unit G Northampton, MA 01060	\$100.00	not employed/not employed
8/19/2025	Von Rosenbach, Shelby 66 Emily Lane Northampton, MA 01060	\$25.00	not employed/not employed
	Continued on next page ----->		

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8/12/2025	Viana, Maria 110 Cardinal Way Northampton, MA 01062	\$75.00	Marketing/TPP
7/02/2025	Wilby, Brian A. 103 Bliss St Florence, MA 01062	\$100.00	
Line 10: Total Receipts over \$50 (or listed above)		\$1,210.00	* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.
Line 11: Total Receipts \$50 and under (not listed above)			
Line 12: TOTAL RECEIPTS IN THE PERIOD		\$1,210.00	← Enter on page 1, line 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
7/22/2025	ActBlue Technical Services	PO Box 962017 Boston, MA 02196-2017	service fee for donation software	\$2.38
8/3/2025	ActBlue Technical Services	PO Box 962017 Boston, MA 02196-2017	service fee for donation software	\$1.98
8/12/2025	ActBlue Technical Services	PO Box 962017 Boston, MA 02196-2017	service fee for donation software	\$7.92
8/19/25	ActBlue Technical Services	PO Box 962017 Boston, MA 02196-2017	service fee for donation software	\$28.64
8/26/2025	ActBlue Technical Services	PO Box 962017 Boston, MA 02196-2017	service fee for donation software	\$0.99
7/22/2025	NameCheap.com	4600 East Washington St. Suite 300 Phoenix, AZ 85034	for campaign website domain name registration	\$6.69
7/28/2025	NameCheap.com	4600 East Washington St. Suite 300 Phoenix, AZ 85034	for campaign website	\$17.76
8/13/2025	Signs.com	8000 Haskell Ave Van Nuys, CA 91406	for campaign yard signs	\$328.71
7/28/2025	Staples, Inc.	125 Westgate Center Drive Hadley, MA 01035	for campaign business cards	\$7.43
7/28/2025	Staples, Inc.	125 Westgate Center Drive Hadley, MA 01035	for campaign business cards	\$59.49

Enter expenditure totals on Page 5

