



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 16 PM 1:43

with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/19/2019 Ending Date: 12/31/2019

Type of Report: (Check one)

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

Alanna L. Nelson

Candidate Full Name (if applicable)

Melrose Ward 1

Office Sought and District

14 Summit Avenue, Melrose, MA 02176

Residential Address

E-mail: tactilet@me.com

Phone # (optional): 617.398.0613

The Committee to Elect Alanna L. Nelson

Committee Name

Gioia N. Chaouch

Name of Committee Treasurer

P.O. Box 761092

Committee Mailing Address

E-mail: hello@alanna-ward1.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	-31.09
Line 2: Total receipts this period (page 3, line 11)	138.41
Line 3: Subtotal (line 1 plus line 2)	107.32
Line 4: Total expenditures this period (page 5, line 14)	57.11
Line 5: Ending Balance (line 3 minus line 4)	50.21
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Northern Bank and Trust Company

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: Gioia N. Chaouch (Treasurer's signature)

Date: 16 January 2020

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: Alanna L. Nelson (Candidate's signature)

Date: 15 Jan 2020

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)
10/22/2019	Gordon Nelson 2424 Andre Avenue Janesville, WI 53545	100.00	
11/2/2019	Tanya Nelson 406 Bentwood Drive Marshall, WI	25.00	
11/3/2019	Harry Halloran	15.00	
Line 9: Total Receipts over \$50 (or listed above)		140.00	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		140.00	← 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 A: RECEIPTS (continued)[illegible]

* 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
10/19/2019	Home Depot	564 Broadway Saugus, MA 01960	Sign Supplies	19.52
10/22/2019	United States Postal Service	23 Essex Street	Stamps	35.00
11/06/2019	ActBlue	366 Summer Street Somerville, MA 02144	Payment Processing	1.59
Line 12: Total Expenditures over \$50 (or listed above)				57.11
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				

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 B: EXPENDITURES (continued)[illegible]

* 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.

[illegible]

* 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
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				N/A



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

File with City of Melrose Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/2019 Ending Date: 12/31/2019

Type of Report: (Check one)

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

Christian John Hashem
Candidate Full Name (if applicable)
School Committee - Melrose
Office Sought and District
47 West Wyoming Ave, Melrose, MA, 02176
Residential Address
E-mail: hashem.christian@gmail.com
Phone # (optional):

Hashem Campaign
Committee Name
Natasha Hashem
Name of Committee Treasurer
47 West Wyoming Ave, Melrose, MA, 02176
Committee Mailing Address
E-mail: hashem4melrose@gmail.com
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$104.00
Line 2: Total receipts this period (page 3, line 11)	\$0.00
Line 3: Subtotal (line 1 plus line 2)	\$0.00
Line 4: Total expenditures this period (page 5, line 14)	\$0.00
Line 5: Ending Balance (line 3 minus line 4)	\$104.00
Line 6: Total in-kind contributions this period (page 6)	\$0.00
Line 7: Total (all) outstanding liabilities (page 7)	\$0.00
Line 8: Name of bank(s) used:	Eastern 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: Natasha Hashem (Treasurer's signature) Date: 01/06/2020

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: Chris Hashem (Candidate's signature) Date: 01/06/2020

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)
Line 9: Total Receipts over \$50 (or listed above)		\$0.00	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)		\$0.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$0.00	

* 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.)

[illegible]

Line 12: Total Expenditures over \$50 (or listed above)

\$0.00

Line 13: Total Expenditures \$50 and under* (not listed above)

\$0.00

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD

\$0.00

* 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)		\$0.00
		Line 16: In-Kind Contributions \$50 & under (not listed above)		\$0.00
Enter on page 1, line 6 →		Line 17: TOTAL IN-KIND CONTRIBUTIONS		\$0.00

* 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
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	\$0.00



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 17 AM 9:20

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/18/19 Ending Date: 1/17/20

Type of Report: (Check one)

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

Christopher C Cinella
Candidate Full Name (if applicable)
City Councilor At Large
Office Sought and District
69 Cranmore Ln Melrose MA
Residential Address
E-mail: Cinella4melrose@gmail.com
Phone # (optional): _____

Committee to Elect Christopher C Cinella
Committee Name
Margaret G Cinella
Name of Committee Treasurer
69 Cranmore Ln Melrose MA
Committee Mailing Address
E-mail: Cinella4melrose@gmail.com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$67.26</u>
Line 2: Total receipts this period (page 3, line 11)	<u>750</u>
Line 3: Subtotal (line 1 plus line 2)	<u>817.26</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>200</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>617.26</u>
Line 6: Total in-kind contributions this period (page 6)	<u>148.38</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>Melrose Bank</u>

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: Margaret G. Cinella (Treasurer's signature) Date: 1/17/20

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: Christopher C. Cinella (Candidate's signature) Date: 1/17/20

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)
10/22/19	Mary Sexton 19 Sears Ave	\$50	
10/31/19	Caroline Tierney 52 Mystic Ave Melrose	\$50	
11/2/19	Timothy + Samantha Sullivan 36 Arlington Rd	\$100	
11/4/19	Marissa Sullivan 53 Norman Rd Melrose MA 02176	\$50	
11/12/19	MA & No. New England Laborers District Council 7 Laborers Way Hopedale MA 01918	\$500	Laborers Union Anthony PINI

Line 9: Total Receipts over \$50 (or listed above)

750

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

750

← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		750 ← 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.

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.

[illegible]

Enter on page 1, line 4 →

200

Page 4

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Line 12: Expenditures over \$50 (or listed above)				
Line 13: Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				200

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.

[illegible]

* 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.

[illegible]

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

Page 7



Commonwealth
of Massachusetts

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

Revd Melrose
City Hall
K. Foote 1/21/20

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

CPF ID# 17317

Reporting Period: Beginning: 10/28/2019 Ending: 1/21/2020

Type of Report: 2019 Pre-election Report

Thomas, Cory
Full Name of Candidate
Municipal, Local Filer
Office Sought/ District
19 Linwood Avenue
Melrose, MA 02176
Residential Address

Cory Thomas
Committee Name
Michelle Thomas
Name of Committee Treasurer
19 Linwood Avenue
Melrose, MA 02176
Committee Address

SUMMARY BALANCE INFORMATION

Ending balance from previous report:	\$361.76
Total receipts this period:	\$713.22
Subtotal:	\$1,074.98
Total expenditures this period:	\$1,143.06
Ending Balance:	(\$68.08)
Total inkind contributions this period:	\$0.00
Total out of pocket spending this period:	\$0.00
Total outstanding liabilities:	\$0.00
Name of Bank Used:	

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:

Treasurer's signature (in ink)

Date

1/21/20

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, 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

Candidate's signature (in ink)

Date

Cory Thomas

1/21/2020

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>
11/1/2019	Griffith, John MA	\$145.35	
11/19/2019	Izzi, Lou Damon St Melrose, MA 02176	\$121.07	
11/17/2019	mcdonnell, Patricl 97 Meridian Melrose, MA 02176	\$50.00	
11/25/2019	Taglieri, Rich 39 Beech Melrose, MA 02176	\$200.00	owner Giacamos
11/25/2019	Thomas, Michelle 19 Linwood Ave Melrose, MA 02176	\$100.00	
11/19/2019	Walsh, Alicia 124 Whitman Ave Melrose, MA 02176	\$96.80	Commonwealth of Massachusetts
Total Itemized Receipts:		\$713.22	
Total Unitemized Receipts:		\$0.00	
Total Receipts:		<u>\$713.22</u>	

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 Address</u>	<u>Amount</u>	<u>Purpose</u>
11/21/2019	dennis newman 1 Mckinley Square Boston, MA 02108	\$500.00	Recount
10/28/2019	dunkin donuts MA	\$36.63	Coffee For Volunteers
11/4/2019	dunkin donuts MA	\$26.98	Coffee For Volunteers
11/4/2019	dunkin donuts MA	\$33.47	Breakfast For Volunteers
11/7/2019	dunkin donuts MA	\$40.00	Coffee Volunteers
11/22/2019	Giacamos MA	\$130.00	Volunteers Get Together
1/14/2020	Giacamos MA	\$49.00	Team Meeting
11/4/2019	Kappys MA	\$57.36	Supplies For Party
12/12/2019	La Famiglia MA	\$100.00	Staff Lunch

12/16/2019	Michelle Thomas	\$80.00	Reimbursement For Emergency Fund and Other Items
	MA		
10/29/2019	Petrones	\$35.38	Dinner Meeting
	MA		
12/11/2019	Shaws	\$5.00	Gifts
	MA		
12/12/2019	Starbuck	\$5.24	Meeting
	MA		
12/16/2019	Usps	\$44.00	Stamps
	MA		
12/16/2019	Thomas, michelle	\$0.00	
		Total Itemized Expenditures:	\$1,143.06
		Total Unitemized Expenditures:	\$0.00
		Total Expenditures:	<u>\$1,143.06</u>

Schedule R: Reimbursements

<u>Date</u>	<u>Reimbursee</u>	<u>Total Amount</u>
12/16/2019	Thomas, michelle	\$0.00



Commonwealth
of Massachusetts

Form CPF R1: Itemization of Reimbursements
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# 17317

<u>Thomas</u>	<u>Cory Thomas</u>
<i>Individual Being Reimbursed</i>	<i>Committee Name</i>
<u>\$0.00</u>	<u>12/16/2019</u>
<i>Amount of Reimbursement</i>	<i>Date of Reimbursement</i>



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form
CITY OF MELROSE
Office of Campaign and Political Finance
REGISTRARS OF VOTERS

2020 JAN 22 AM 8:48

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

1/1/19

Ending Date:

12/31/19

Type of Report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☐ 30 day after election

☒ year-end report

☐ dissolution

Donald L. Conn Jr
Candidate Full Name (if applicable)

Alderman
Office Sought and District

30 Sunset Rd, Melrose Ma
Residential Address

E-mail: don@scplaw.com

Phone # (optional): 781 799-1325

committee to elect
Donald L Conn Jr
Committee Name

APRIL Conn
Name of Committee Treasurer

30 Sunset Rd, Melrose Ma
Committee Mailing Address

E-mail: _____

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

\$1744.00

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

\$1744.00

Line 4: Total expenditures this period (page 5, line 14)

200

Line 5: Ending Balance (line 3 minus line 4)

\$1544

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used:

EASTERN 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:

April Conn

(Treasurer's signature)

Date:

1/15/20

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:

Donald L Conn Jr

(Candidate's signature)

Date:

1/15/20

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)
Line 9: Total Receipts over \$50 (or listed above)		6	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		0	

* 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
5/3/19	Committee to Elect Ted Betteencourt	386 Lowell St Peabody Ma	Contribution	\$100
1/5/19	U.S. Postal Service	Essex St Melrose, Ma	Postage	\$50
3/23/19	US Postal Service	Essex St Melrose Ma.	Postage	\$50
Line 12: Total Expenditures over \$50 (or listed above)				200
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Line 14: TOTAL EXPENDITURES IN THE PERIOD				200

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.

[illegible]

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

Page 7



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 21 PM 12:51

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/19/2019 Ending Date: 12/31/2019

Type of Report: (Check one)

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

Edward J. O'Connell

Candidate Full Name (if applicable)

School Committee - City of Melrose

Office Sought and District

20 Cleveland Street, Melrose, MA 02176

Residential Address

E-mail: ejomelrose@gmail.com

Phone # (optional):

Committee to Elect Ed O'Connell

Committee Name

James E. O'Connell, Jr.

Name of Committee Treasurer

20 Cleveland Street, Melrose, MA 02176

Committee Mailing Address

E-mail: ejomelrose@gmail.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0.00
Line 2: Total receipts this period (page 3, line 11)	500.00
Line 3: Subtotal (line 1 plus line 2)	500.00
Line 4: Total expenditures this period (page 5, line 14)	33.51
Line 5: Ending Balance (line 3 minus line 4)	466.49
Line 6: Total in-kind contributions this period (page 6)	0.00
Line 7: Total (all) outstanding liabilities (page 7)	0.00
Line 8: Name of bank(s) used:	<u>Bank of America</u>

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: _____ (Treasurer's signature)

Date: 01/21/2020

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: _____ (Candidate's signature)

Date: 01/21/2020

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.)

[illegible]

Line 9: Total Receipts over \$50 (or listed above)	500.00
--	--------

Line 10: Total Receipts \$50 and under* (not listed above)	0.00
--	------

Line 11: TOTAL RECEIPTS IN THE PERIOD	500.00
--	---------------

← 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
12/31/2019	Bank of America	P.O. Box 15284 Wilmington, MA 19850	Service Charge	33.51
		Line 12: Total Expenditures over \$50 (or listed above)		33.51
		Line 13: Total Expenditures \$50 and under* (not listed above)		0.00
Enter on page 1, line 4 →		Line 14: TOTAL EXPENDITURES IN THE PERIOD		33.51

* 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)		0.00
		Line 16: In-Kind Contributions \$50 & under (not listed above)		0.00
Enter on page 1, line 6 →		Line 17: TOTAL IN-KIND CONTRIBUTIONS		0.00

* 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
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	0.00

[illegible]



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

File with City and Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/19/2019 Ending Date: 12/31/2019

Type of Report: (Check one)

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

Jack Eccles

Candidate Full Name (if applicable)

Councilor-at-Large

Office Sought and District

99 Essex St Unit 10 Melrose, MA 02176

Residential Address

E-mail: jack@jackformelrose.com

Phone # (optional): 781-913-0188

Jack Eccles

Committee Name

Laura Gomez

Name of Committee Treasurer

99 Essex St Unit 10 Melrose, MA 02176

Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

1518.17

Line 2: Total receipts this period (page 3, line 11)

1195

Line 3: Subtotal (line 1 plus line 2)

2713.17

Line 4: Total expenditures this period (page 5, line 14)

2378.07

Line 5: Ending Balance (line 3 minus line 4)

335.10

Line 6: Total in-kind contributions this period (page 6)

328.50

Line 7: Total (all) outstanding liabilities (page 7)

Line 8: Name of bank(s) used: Eastern 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: [Signature] (Treasurer's signature)

Date: 1/19/2020

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: [Signature] (Candidate's signature)

Date: 1/19/2020

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)
10/31/2019	Mindy Domb 106 Larkspur Dr Amherst, MA 01002	25	State Representative Commonwealth of Massachusetts
11/6/2019	Sam Hammar 12 Bartletts St Melrose, MA 02176	20	Government Employee Commonwealth of Massachusetts
10/28/2019	Jack Eccles 99 Essex St Unit 10 Melrose, MA 02176	150	Technology Consultant Paytronix Systems
11/12/2019	Jack Eccles 99 Essex St Unit 10 Melrose, MA 02176	350	Technology Consultant Paytronix Systems
10/21/2019	Robert Dolan Committee 202 Bonham Rd Dedham, MA 02026	100	OCPF ID: 16096
10/21/2019	Greg Eccles 99 Essex St Unit 10 Melrose, MA 02176	300	Consultant, Cyceccs Inc.
12/28/2019	MA & Northern NE Laborers' District Council 7 Laborers Way Hopkington, MA 01748	250	OCPF ID: 80479
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1195	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1195 ← 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
10/22/2019	Facebook	1 Hacker way Menlo Park, CA 94025	Advertising	75
10/22/2019	The Tee Shirt Guy	35 Russell St Melrose, MA 02176	Banner and T-Shirts	200
10/22/2019	Newton USPS	326 Watertown St Newton, MA 02458	Stamps	280
10/23/2019	Newton USPS	326 Watertown St Newton, MA 02458	Stamps	70
10/24/2019	Connolly Printing	17 Gill St Woburn, MA 01801	Mailer	1524.57
11/4/2019	Facebook	1 Hacker way Menlo Park, CA 94025	Advertising	148.12
Line 12: Total Expenditures over \$50 (or listed above)				2297.69
Line 13: Total Expenditures \$50 and under* (not listed above)				80.38
<div style="display: flex; justify-content: space-between;"> Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD </div>				2378.07

* 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 B: EXPENDITURES (continued)

* 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.

* 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.



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

File with: City of Melrose Election Commission

Fill in Reporting Period dates:

Beginning Date:

11/12/19

Ending Date:

12/31/19

Type of Report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☐ 30 day after election

☒ year-end report

☒ dissolution

James Bennett
Candidate Full Name (if applicable)

City Counselor
Office Sought and District

45 Wentworth Rd Melrose MA
Residential Address

E-mail: Jim.Bennett@melrose.com

Phone # (optional): 781-454-9959

Committee to Elect Jim Bennett
Committee Name

Thomas V. Bennett
Name of Committee Treasurer

45 Wentworth Rd Melrose MA 02176
Committee Mailing Address

E-mail: VB2020@gmail.com

Phone # (optional): 781-720-4785

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

0

Line 4: Total expenditures this period (page 5, line 14)

0

Line 5: Ending Balance (line 3 minus line 4)

0

Line 6: Total in-kind contributions this period (page 6)

Line 7: Total (all) outstanding liabilities (page 7)

Line 8: Name of bank(s) used:

Eastern 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:

[Signature] (Treasurer's signature)

Date: 1/31/20

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:

(Candidate's signature)

Date: _____



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE
RECORDS OF VOTERS
2020 JAN 21 AM 10:58

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10.19.19 Ending Date: 12.31.19

Type of Report: (Check one)

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

Jeffrey Charles McNaught

Candidate Full Name (if applicable)

Ward 2 City Council

Office Sought and District

94 Clifford Street, Melrose, MA 02176

Residential Address

E-mail: jmcnaught@cityofmelrose.org

Phone # (optional):

Committee to Elect Jeffrey C McNaught

Committee Name

Kathryn McNaught

Name of Committee Treasurer

94 Clifford Street, Melrose, MA 02176

Committee Mailing Address

E-mail: kt02363367@yahoo.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	1,994.8
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	1,944.8
Line 4: Total expenditures this period (page 5, line 14)	1,135.53
Line 5: Ending Balance (line 3 minus line 4)	809.27
Line 6: Total in-kind contributions this period (page 6)	302.5
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Northern Bank, Melrose, MA

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: *Kathryn McNaught* (Treasurer's signature)

Date: 1.17.20

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: *Jeffrey C McNaught* (Candidate's signature)

Date: 1.17.20

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.)

* 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

* 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
11.18.19	Marc Davis/Axis Promotions	78 Blanchard Road, Suite 403, Burlington, MA 01803	Hats for campaign handouts	835.53
11.18.19	Friends of Melrose Football Varsity Club	62 East Street, Melrose, MA 02176	Campaign page in MHS Football program	200
12.12.19	Committee to Elect Kate Lipper- Garabedian	21 Mystic Ave, Melrose, MA 02176	Donation to support Katie Lipper-Garabedian for MA State Representative campaign	100
Line 12: Total Expenditures over \$50 (or listed above)				1,135.53
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1,135.53

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 B: EXPENDITURES (continued)[illegible]

* 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
10.22.19	Maura Pelham	53 Orient Ave, Melrose, MA 02176	Campaign donation	50.42
10.17.19	Stephen McNaught	8 Philips Road, Stoneham, MA 02180	Campaign donation	252.08
Line 15: In-Kind Contributions over \$50 (or listed above)				302.5
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				302.5

* 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.

[illegible]



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance **CITY OF MELROSE**
REGISTRARS OF VOTERS

2020 JAN 21 PM 2:06

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/19/19 Ending Date: 12/31/19

Type of Report: (Check one)

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

Jennifer Grigoraitis
Candidate Full Name (if applicable)
City Councilor Ward 6
Office Sought and District
419 Lebanon St. Melrose, MA 02176
Residential Address
E-mail: jgrigas@gmail.com
Phone # (optional): _____

Friends of Jennifer Grigoraitis
Committee Name
Elken McEllynn
Name of Committee Treasurer
127A Vinton St. Melrose, MA 02176
Committee Mailing Address
E-mail: jenniferward6treasurer@gmail.com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>1,471.33</u>
Line 2: Total receipts this period (page 3, line 11)	<u>105.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>1,576.33</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>927.55</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>648.78</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>Eastern Bank</u>

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: Bun McEllynn (Treasurer's signature)

Date: 1/9/2020

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: [Signature] (Candidate's signature)

Date: 1/9/2020

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)
22-Oct-2019	Rebecca Bruno 39 Adams St. Brookline MA 02466	\$ 25.00	
22-Oct-2019	Amanda Smith 397 Ferry St. Malden, MA 02148	\$ 25.00	
31-Oct-2019	Michelle Moore 188 E. Foster St. Melrose, MA 02176	\$ 25.00	
3-Nov-2019	Alicia Agnevi 1406 Soledad Van Ness Ave. San Francisco, CA 09440	\$ 30.00	
Line 9: Total Receipts over \$50 (or listed above)		105.00	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		105.00	← 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 A: RECEIPTS (continued)[illegible]

* 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
19-Oct-2019	Jennifer Grigoraitis re-imbursement	419 Lebanon St. Melrose, MA 02176	stamps	\$105.00
29-Oct-2019	Jennifer Grigoraitis re-imbursement	419 Lebanon St. Melrose, MA 02176	Valm cards	\$241.65
28-Oct-2019	Potter's Printers	822 Eastern Ave Fall River, MA 02723	Door Hangers	\$552.40
Ongoing	PayPal	2211 N. 1st St. San Jose, CA 95131	Fees	\$28.50
Line 12: Total Expenditures over \$50 (or listed above)				927.55
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				927.55

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 B: EXPENDITURES (continued)[illegible]

* 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)	
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.



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

CITY CLERK MELROSE-MA

2019 DEC 5 PM 2:53

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

1/1/2019

Ending Date:

12/5/2019

Type of Report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☐ 30 day after election

☐ year-end report

☒ dissolution

Jennifer Lemmerman
Candidate Full Name (if applicable)

Office Sought and District
1 Bradley Rd, Andover MA 01810
Residential Address

E-mail: jennifer.lemmerman@gmail.com

Phone # (optional): _____

Committee to Elect Jennifer Lemmerman
Committee Name

John Lemmerman
Name of Committee Treasurer

1 Bradley Rd, Andover MA 01810
Committee Mailing Address

E-mail: jeh4ward2@gmail.com

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

1327.78

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

1327.78

Line 4: Total expenditures this period (page 5, line 14)

1327.78

Line 5: Ending Balance (line 3 minus line 4)

0

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used:

Eastern 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:

[Signature]

(Treasurer's signature)

Date: 12/5/19

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:

[Signature]

(Candidate's signature)

Date: 12/5/19

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.)

[illegible]

Line 9: Total Receipts over \$50 (or listed above)

0

Line 10: Total Receipts \$50 and under* (not listed above)

0

Line 11: TOTAL RECEIPTS IN THE PERIOD

0

← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

* 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
10/7/19	Follow Your Art		Donation	350.00
10/4/19	Melrose Alliance Against Violence		Donation	500.00
5/2/19	Melrose Drama		Ad	40.00
4/22/19	Melrose Education Foundation		Donation	50.00
12/4/19	Melrose Grad Night		Donation	277.84
3/25/19	Shaws		Supplies for chili challenge	109.44

Line 12: Total Expenditures over \$50 (or listed above)	1237.28
---	---------

Line 13: Total Expenditures \$50 and under* (not listed above)	90.00
--	-------

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD	1327.28
---	---------

* 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 B: EXPENDITURES (continued)[illegible]

Line 12: Expenditures over \$50 (or listed above)

Line 13: Expenditures \$50 and under* (not listed above)

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD

* 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.

[illegible]

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



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

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

CPF ID# 16723

2020 JAN 21 PM 1:43

Reporting Period: Beginning: 1/1/2019 Ending: 12/31/2019

Type of Report: 2019 Year-end Report

McAndrew, Jennifer

Full Name of Candidate

Municipal, Local Filer

Office Sought/ District

12 Sears Ave
Melrose, MA 02176

Residential Address

McAndrew Committee

Committee Name

Gemma Martin

Name of Committee Treasurer

202 Bonham Road
Dedham, MA 02026

Committee Address


SUMMARY BALANCE INFORMATION

Ending balance from previous report:	\$261.89
Total receipts this period:	\$0.00
Subtotal:	\$261.89
Total expenditures this period:	\$89.00
Ending Balance:	\$172.89
Total inkind contributions this period:	\$300.00
Total out of pocket spending this period:	\$300.00
Total outstanding liabilities:	\$0.00
Name of Bank Used:	

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:



Treasurer's Signature (in ink)

Date

1/11/2020

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, 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:



Candidate's Signature (in ink)

Date

1/17/2020

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 Address</u>	<u>Amount</u>	<u>Purpose</u>
4/26/2019	Friends of Melrose Drama 360 Lynn Fells Pkwy Melrose, MA 02176	\$65.00	Donation
4/13/2019	Melrose Little League 19 Linwood Avenue Melrose, MA 02176	\$300.00	Sponsorship
Total Itemized Expenditures:		\$365.00	
Total Unitemized Expenditures:		\$24.00	
Total Expenditures:		<u>\$389.00</u>	

Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind 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>Value</u>	<u>Description, Occupation & Employer</u>
4/4/2019	McAndrew, Jen 12 Sears Ave Melrose, MA 02176	\$300.00	Director of Communications, Strategy & Planning Tufts University0 Melrose Little League Donation
Total Itemized In-kind Contributions:		\$300.00	
Total Unitemized In-kind Contributions:		\$0.00	
Total In-kind Contributions:		<u>\$300.00</u>	

Schedule O: Candidate Out-Of-Pocket Expenses

<u>Date</u>	<u>Name and Address</u>	<u>Amount</u>	<u>Purpose</u>
4/13/2019	Melrose Little League 19 Linwood Avenue Melrose, MA 02176	\$300.00	Sponsorship



Commonwealth
of Massachusetts

Candidate Out of Pocket Expenses
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# 16723

<u>\$300.00</u>	<u>4/13/2019</u>
<i>Total of Out of Pocket Expenses</i>	<i>Date of Expenditure(s)</i>



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance
CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 17 AM 7:50

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/19 Ending Date: 12/31/19

Type of Report: (Check one)

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

Jennifer G. Razi-Thomas
Candidate Full Name (if applicable)
School Committee- Melrose, MA
Office Sought and District
106 Walton Park, Melrose, MA 02176
Residential Address
E-mail: <u>jenniferthomas04@yahoo.com</u>
Phone # (optional): <u>617)276-5962</u>

Committee Name
Name of Committee Treasurer
Committee Mailing Address
E-mail: _____
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	-0-
Line 2: Total receipts this period (page 3, line 11)	-0-
Line 3: Subtotal (line 1 plus line 2)	-0-
Line 4: Total expenditures this period (page 5, line 14)	-0-
Line 5: Ending Balance (line 3 minus line 4)	-0-
Line 6: Total in-kind contributions this period (page 6)	-0-
Line 7: Total (all) outstanding liabilities (page 7)	-0-
Line 8: Name of bank(s) used: <u>n/a</u>	

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: _____ (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.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 1/16/20



Commonwealth
of Massachusetts

Municipal Form

Office of Campaign and Political Finance CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 21 PM 3:47
with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-19 Ending Date: 12-31-19

Type of Report: (Check one)

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

John Obrowski
Candidate Full Name (if applicable)
School Committee
Office Sought and District
55 Hawley Road
Residential Address
E-mail: johobrowski@gmail.com
Phone # (optional):

Committee to Elect Dr. Obrowski
Committee Name
Stephane Chiffre
Name of Committee Treasurer
P.O. Box 768076 Melrose MA
Committee Mailing Address
E-mail:
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

1400.33

Line 2: Total receipts this period (page 3, line 11)

1000.00

Line 3: Subtotal (line 1 plus line 2)

2400.33

Line 4: Total expenditures this period (page 5, line 14)

104.82

Line 5: Ending Balance (line 3 minus line 4)

2295.51

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

6939.50

Line 8: Name of bank(s) used:

Melrose Cooperative

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:

Stephane Chiffre

(Treasurer's signature)

Date: 1/20/20

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.

Date:

(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.)

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

(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.)

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

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.

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
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	6939.50



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form CITY OF MELROSE
Office of Campaign and Political Finance REGISTRARS OF VOTERS

2020 JAN 21 PM 3:05

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/29/2019 Ending Date: 12/31/2019

Type of Report: (Check one)

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

John N. Tramontozzi
Candidate Full Name (if applicable)
City Council, Ward 1
Office Sought and District
794 Franklin Street
Residential Address
E-mail: TramontozziLaw@gmail.com
Phone # (optional): _____

Committee to Elect John N. Tramontozzi
Committee Name
Martha Quigley
Name of Committee Treasurer
794 Franklin Street
Committee Mailing Address
E-mail: JNTLAW@AOL.COM
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>\$ 334.79</u>
Line 2: Total receipts this period (page 3, line 11)	<u>- 0 -</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$ 334.79</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>- 0 -</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$ 334.79</u>
Line 6: Total in-kind contributions this period (page 6)	<u>- 0 -</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>- 0 -</u>
Line 8: Name of bank(s) used:	<u>Eastern Bank</u>

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: Martha Quigley (Treasurer's signature)

Date: 1/20/2020

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: John N. Tramontozzi (Candidate's signature)

Date: 1/20/2020



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 21 AM 11:55

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

CPF ID# 17408

Reporting Period: Beginning: 10/19/2019 Ending: 12/31/2019

Type of Report: 2019 Year-end Report

Lipper-Garabedian, Kate

Full Name of Candidate

House, 32nd Middlesex

Office Sought/ District

21 Mystic Avenue
Melrose, MA 02176

Residential Address

Lipper-Garabedian Committee

Committee Name

Lisa S. Ballew

Name of Committee Treasurer

3 Franklin Terrace
Melrose, MA 02176

Committee Address

SUMMARY BALANCE INFORMATION

Ending balance from previous report:	\$6,078.76
Total receipts this period:	\$13,509.17
Subtotal:	\$19,587.93
Total expenditures this period:	\$7,524.16
Ending Balance:	\$12,063.77
Total inkind contributions this period:	\$0.00
Total out of pocket spending this period:	\$0.00
Total outstanding liabilities:	\$0.00
Name of Bank Used:	

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:

Lisa S Ballew
Treasurer's signature (in ink)

Jan. 17, 2020
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, 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:

Kate S
Candidate's signature (in ink)

1/21/2020
Date

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.

Date	Name and Residential Address	Amount	Occupation and Employer
12/20/2019	Anderman, Jonathan 30 Hanson St #3 Boston, MA 02118	\$500.00	Attorney Holland & Knight LLP
12/18/2019	Baab, Molly 52 Sears Ave Melrose, MA 02176	\$100.00	Chief Product Officer Business.Com
12/27/2019	Ballew, Lisa 3 Franklin Ter Melrose, MA 02176	\$200.00	Lawyer Edc Inc
12/31/2019	Bell Jr-2019, Robert 173 Ashland St Melrose, MA 02176	\$250.00	Lawyer Bell & Izzi LLC
12/10/2019	Bhattacharya, Radhika 159 Saint Botolph St #1 Boston, MA 02115	\$100.00	Attorney Greater Boston Legal Services
12/27/2019	Boyle, Tom 506 Princeton Gate Court Chesterfield, MI 63017	\$1,000.00	Sales Enterprise
12/27/2019	Brown, Blair 24 Mountwood Rd Swampscott, MA 01907	\$200.00	Chief of Staff Commonwealth of Massachusetts
12/20/2019	Caggiano, Mary 20 Emeline St Woburn, MA 01801	\$150.00	Not Employed Not Employed
12/27/2019	Chen, Julia 39 Woodland Ave Melrose, MA 02176	\$100.00	Attorney General Electric

12/20/2019	Committee To Elect Christopher C. Cinella 69 Cranmore Lane Melrose, MA 02176	\$100.00	
12/20/2019	Committee To Elect Jeffrey McNaught 94 Clifford St Melrose, MA 02176	\$100.00	
12/18/2019	Cormier, Amanda 299 Grove St Melrose, MA 02176	\$25.00	Not Employed Not Employed
11/12/2019	Early, Shane 30 Temple St Boston, MA 02114	\$500.00	General Counsel Dept Public Utilities
11/7/2019	Edds, Margaret 3135 Grove Ave Richmond, VA 01254	\$500.00	Retired Retired
12/17/2019	Fates, Linda 48 Skytop Road Ipswich, MA 01938	\$200.00	Retired Retired
12/31/2019	Ferraro, Luke 1 Doubletree Lane De Peres, MO 63131	\$500.00	Research Montea Group
12/13/2019	Fridge, Jessica 224 S Solomon St New Orleans, la 70119	\$100.00	Epidemiologist Office of Public Health
12/20/2019	Garabedian, Dawna 222 Apache Way Tewksbury, MA 01876	\$500.00	Retired Retired
12/31/2019	Garabedian, Paul 414 Mount Auburn St Watertown, MA 02472	\$150.00	
12/20/2019	Garrett, Betsy 70 Ardsmoor Rd Melrose, MA 02176	\$50.00	Not Employed Not Employed
12/20/2019	Greski, Rick 23 Brazil St Melrose, MA 02176	\$300.00	Retired Retired
12/27/2019	Grigoraitis, Jennifer 419 Lebanon St Melrose, MA 02176	\$100.00	Chief of Stff MOVA
12/10/2019	Hagan, Katherine 1306 South St Durham, NC 27707	\$100.00	Associate RPK Group
12/13/2019	Levine, Rebecca 21765 Westmont Ct Boca Raton, FL 33428	\$200.00	Legal Recruiter BCG
12/27/2019	Lewis, Lisa 18 Pine St Melrose, MA 02176	\$100.00	Coordinator The Bridge
10/25/2019	Lieberman, Elliot 106 Oakdale Rd Baltimore, MD	\$1,000.00	Retired Retired

11/7/2019	Lipper, Bob 3135 Grove Ave Richond, VA	\$500.00 Retired Retired
12/1/2019	Lipper-Garabedian, Kate 21 Mystic Ave Melrose, MA 02176	\$1,000.00 Chief Legal Counsel Massachusetts Executive Office of Education
12/27/2019	Lord, Arthur 2617 E Randolph Ave Alexandria, VA 22301	\$75.00 Advisor Dod
12/20/2019	McAndrew, Jennifer 12 Sears Ave Melrose, MA 02176	\$100.00
12/20/2019	Moore, Paul 35 Laurel St Melrose, MA 02176	\$100.00
12/20/2019	Mortimer, Peter 48 Mt. Hood Terr Melrose, MA 02176	\$110.00
12/18/2019	Murphy, Michael 66 Watervale Rd Medford, MA 02155	\$100.00 Attorney K&l Gates
12/20/2019	Murphy, Nicholas 121 Conant Road Melrose, MA 02176	\$250.00 VP Sales Brian Murphy Group
12/13/2019	Myers, Annie 1601 Reliez Valley Rd Lafayette, CA 94549	\$500.00 Not Employed Not Employed
12/13/2019	Nichols, Michael 120 Mountfort St Unit 101 Boston, MA 02215	\$250.00 Executive Director Esplanade Association
12/20/2019	Peterson, Gayle 20 Sargent St Melrose, MA 02176	\$100.00 RN MGH
12/31/2019	Polo, Alan 44 Doubling Rd Greenwich, CT 06830	\$200.00 Sales & Trading Alliance Bernstein
12/13/2019	Pritchard, Robert 88 Shadbush Way Arnold, MD 21012	\$100.00 Architect Jp2 Architects
12/10/2019	Pudelski, Sasha 1909 Main Line Blvd Unit 102 Alexandria, VA 22301	\$250.00 Lobbyist AASA
12/31/2019	Reale, Ann 1597 Washington St #503 Boston, MA 02118	\$100.00 Manager Commonwealth of Massachusetts
12/27/2019	Salomon, Nina 11285 Market St Fulton, MD 20759	\$100.00 Deputy Program Director Council of State Governments
12/27/2019	Sande, Margaret 1975 Pheasant Lane Charlottesville, VA 22901	\$100.00 ER UVA

12/18/2019	Sherman, Meredith 2000 Thorncrag Lane Midlothian, VA 23112	\$100.00 Nurse Practioner Bon Secours Mercy Health
12/20/2019	Spatola, David 22 Shoalcreek Rd Hudson, NH 03051	\$200.00 Owner Enviro Tech Pest Control
12/18/2019	Stewart, Robb 92 Trenton St Melrose, MA 02176	\$100.00 Sales Executive IQVIA
12/18/2019	Tierney, James 64 Garfield St Melrose, MA 02176	\$200.00 Managing Director JLL
12/18/2019	Vujanic, Anica 677 Massachusetts Ave Boston, MA 02118	\$200.00 Store Owner Tadpole
12/10/2019	Winnick, Steve 4514 Connecticut Ave Nw Washington, DC 20008	\$100.00 Attorney Nelson Mullens Riley
12/10/2019	Yeager, Margery 5332 Sherier Pl Nw Washington, DC 20016	\$100.00 Partner, Advocacy Education Forward Dc
Total Itemized Receipts:		\$11,843.17
Total Unitemized Receipts:		\$1,666.00
Total Receipts:		<u>\$13,509.17</u>

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 Address</u>	<u>Amount</u>	<u>Purpose</u>
12/10/2019	ActBlue	(\$29.64)	Processing Fee
12/13/2019	Actblue	(\$63.25)	Processing Fee
12/18/2019	ActBlue	(\$45.46)	Processing Fee
12/27/2019	Actblue	(\$78.48)	Processing Fee
12/27/2019	Ck Strategies 15 Broad St Ste 610 Boston, MA 02108	\$1,211.82	Design/printing
10/21/2019	Connolly Printing 17 Gill St Woburn, MA 01801	\$786.25	Printing
11/14/2019	Connolly Printing 17 Gill St Woburn, MA 01801	\$2,774.57	Printing
12/12/2019	Dockside 1099 Main St Wakefield, MA 01880	\$282.00	Kick Off Catering
12/3/2019	Massachusetts Democratic Party 11 Beacon St Boston, MA 02108	\$1,250.00	Votebuilder

11/6/2019	Melrose Diner 44 W Wyoming Ave Melrose, MA 02176	\$137.00 Breakfast For Poll Volunteers
12/13/2019	Melrose Weekly News 26 Albion St Wakefield, MA 01880	\$200.00 Advertising
11/25/2019	Squarespace 8 Clarkson St Ny, NY 10012	\$212.93 Website
12/27/2019	Squarespace 8 Clarkson St Ny, NY 10012	\$6.37 Website
11/15/2019	Tdm Photography 323 Grove St Melrose, MA 02176	\$475.00 Photography
Total Itemized Expenditures:		\$7,335.94
Total Unitemized Expenditures:		\$188.22
Total Expenditures:		<u>\$7,524.16</u>



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 17 AM 9:53

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: December 6, 2019 Ending Date: January 17, 2020

Type of Report: (Check one)

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

Leila Migliorelli

Candidate Full Name (if applicable)

City Councilor: At-Large

Office Sought and District

25 Dartmouth Road, Melrose, MA 02176

Residential Address

E-mail: leilabsm@gmail.com

Phone # (optional): (617) 470-5338

Committee to Elect Leila Migliorelli

Committee Name

Michael A. Stankavish

Name of Committee Treasurer

610-A Main Street, Melrose, MA 02176

Committee Mailing Address

E-mail: m.stankavish@gmail.com

Phone # (optional): (781) 281-6082

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	844.49
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	844.49
Line 4: Total expenditures this period (page 5, line 14)	10.61
Line 5: Ending Balance (line 3 minus line 4)	833.88
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Eastern 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: [Signature] (Treasurer's signature)

Date: Jan 17, 2020

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: [Signature] (Candidate's signature)

Date: Jan 17, 2020

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)
Line 9: Total Receipts over \$50 (or listed above)		0	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		0	

* 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

* 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
Dec 29, 2019	Mail Chimp	675 Ponce De Leon Ave NE Suite 500, Atlanta, GA 30308		10.61
			Line 12: Total Expenditures over \$50 (or listed above)	10.61
			Line 13: Total Expenditures \$50 and under* (not listed above)	0
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	10.61

* 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 B: EXPENDITURES (continued)[illegible]

Line 12: Expenditures over \$50 (or listed above)

Line 13: Expenditures \$50 and under* (not listed above)

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD

* 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.

[illegible]

* 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
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	0

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# 17115

CITY OF MELROSE
REGISTRARS OF VOTERS

Reporting Period: Beginning: 12/6/2019 Ending: 12/31/2019

2020 JAN 21 AM 8:52

Type of Report: 2019 Year-end Report

DeSelm, Lizbeth Celeste

Full Name of Candidate

Municipal, Local Filer

Office Sought/ District

**33A South High Street
Melrose, MA 02176**

Residential Address

DeSelm Committee

Committee Name

Elizabeth Benagh

Name of Committee Treasurer

**333 South Street, Unit A
Melrose, MA 02173**

Committee Address

SUMMARY BALANCE INFORMATION

Ending balance from previous report:	\$1,517.56
Total receipts this period:	\$10.00
Subtotal:	\$1,527.56
Total expenditures this period:	\$0.00
Ending Balance:	\$1,527.56
Total inkind contributions this period:	\$0.00
Total out of pocket spending this period:	\$0.00
Total outstanding liabilities:	\$388.55
Name of Bank Used:	

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:

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:

Candidate's signature (in ink)

Date

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.

Date Name and Residential Address

Amount Occupation and Employer

Total Itemized Receipts:	<u>\$0.00</u>
Total Unitemized Receipts:	<u>\$10.00</u>
Total Receipts:	<u>\$10.00</u>

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>
12/5/2019	DeSelm, Lizbeth Celeste 33A South High Street Melrose, MA 02176		\$388.55	
	Outstanding Liabilities:		<u>\$388.55</u>	

[illegible]



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance
CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 17 AM 9:02

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/19 Ending Date: 12/31/19

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

Mark E. Askenazy
 Candidate Full Name (if applicable)
 Alderman at Large
 Office Sought and District
 100 Vinton St., Melrose, Ma. 02176
 Residential Address
 E-mail:
 Phone # (optional):

Committee to Elect Mark Askenazy
 Committee Name
 Daniel C. Fusco
 Name of Committee Treasurer
 100 Vinton St., Melrose, Ma. 02176
 Committee Mailing Address
 E-mail:
 Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$43.00
Line 2: Total receipts this period (page 3, line 11)	\$0.00
Line 3: Subtotal (line 1 plus line 2)	\$43.00
Line 4: Total expenditures this period (page 5, line 14)	\$0.00
Line 5: Ending Balance (line 3 minus line 4)	\$43.00
Line 6: Total in-kind contributions this period (page 6)	\$0.00
Line 7: Total (all) outstanding liabilities (page 7)	\$0.00
Line 8: Name of bank(s) used:	Eastern 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: _____ (Treasurer's signature)

Date: 1/17/20

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: Mark Askenazy (Candidate's signature)

Date: 1/17/20



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Office of Campaign and Political Finance
CITY OF MELROSE
REGISTRARS OF VOTERS

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

2020 JAN 17 AM 9:02

CPF ID# 17379

Reporting Period: Beginning: 10/29/2019 Ending: 12/31/2019

Type of Report: 2020 Year-end Report

Garipay, Mark D.

Full Name of Candidate

Municipal, Local Filer

Office Sought/ District

71 Mooreland Road
Melrose, MA 02176

Residential Address

Garipay Committee

Committee Name

Andrea Garipay

Name of Committee Treasurer

71 Mooreland Road
Melrose, MA 02176

Committee Address

SUMMARY BALANCE INFORMATION

Ending balance from previous report:	\$9,932.39
Total receipts this period:	\$300.00
Subtotal:	\$10,232.39
Total expenditures this period:	\$2,604.93
Ending Balance:	\$7,627.46
Total inkind contributions this period:	\$0.00
Total out of pocket spending this period:	\$0.00
Total outstanding liabilities:	\$0.00
Name of Bank Used:	

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:

Andrea Garipay
Treasurer's signature (in ink)

1/15/20
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, 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 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>
11/4/2019	Driscoll, David 32 Conrad Rd. Melrose, MA 02176	\$100.00	Retired Retired
11/2/2019	O'Bremski, John 55 Hawley Rd. Melrose, MA 02176	\$50.00	
10/30/2019	Pellegrino, Joann 143 East Emerson St. Melrose, MA 02176	\$100.00	
10/30/2019	Welch, John 20 Boltoph St. Melrose, MA 02176	\$50.00	
Total Itemized Receipts:		\$300.00	
Total Unitemized Receipts:		\$0.00	
Total Receipts:		<u>\$300.00</u>	

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.

Date Name and Address

Amount Purpose

11/5/2019 **621 Tavern and Grill**
621 Braodway St.
Malden, MA 02148

\$96.62 Lunch/pizza For Election Day

10/31/2019 **Cambridge Repro-graphics**
21 McGrath Highway
Somerville, MA 02143

\$559.14 Door Hangers and Banner

10/31/2019 **Cambridge Repro-graphics**
21 McGrath Highway
Somerville, MA 02143

\$1,045.50 Ward Mailers

11/5/2019 **Giacomo's**
454 Main St.
Melrose, MA 02176

\$143.50 Election Night Campaign Event

11/5/2019 **Giacomo's**
454 Main St.
Melrose, MA 02176

\$668.17 Election Night Campaign Event

12/19/2019 **Melrose Emergency Fund**
562 Main St.
Melrose, MA 02176

\$50.00 Donation

10/29/2019 **Us Postal Service**
23 Essex St
Melrose, MA 02176

\$42.00 Stamps

Total Itemized Expenditures:	\$2,604.93
Total Unitemized Expenditures:	\$0.00
Total Expenditures:	<u>\$2,604.93</u>

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 21 AM 11:03

Commonwealth
of MassachusettsFile with:
City or Town Clerk or Election Commission

Reporting Period Beginning	1/1/2019	Ending:	12/31/2019
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Type of report: Year-end

Mary Beth McAteer-Margolis	Committee to Elect McAteer-Margolis
<i>Full Name of Candidate</i>	<i>Committee Name</i>
Alderman at Large	Kathleen McCarron
<i>Office Sought/ District</i>	<i>Name of Committee Treasurer</i>
22 Stowecroft Road, Melrose, MA 02176	24 Elmcrest Circle, Melrose, MA 02176
<i>Residential Address</i>	<i>Committee Mailing Address</i>

SUMMARY BALANCE INFORMATION

Line 1: Ending balance from previous report:	\$507.38
Line 2: Total receipts this period (Schedule A)	\$0.00
Line 3: Subtotal (line 1 plus line 2)	\$507.38
Line 4: Total expenditures this period (Schedule B)	\$0.00
Line 5: Ending balance (line 3 minus line 4)	\$507.38
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 of bank(s) used	<u>Eastern Bank</u>

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)

Date

Affidavit of Candidate (check 1 box only)

☒ **Candidate with Committee an 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

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.

[illegible]

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.

Date	Name and Residential Address	Value	Description/ Occupation and Employer
------	------------------------------	-------	--------------------------------------

\$0.00

Line 15: Total in-kind listed above	\$0.00
-------------------------------------	--------

Line 16: Total in-kind not listed above	\$0.00
---	--------

Line 17: Total in-kind in the period	\$0.00
--------------------------------------	--------

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.

Date Incurred	To Whom Due	Amount	Purpose
		\$0.00	
Line 18: Outstanding liabilites (ALL)		\$0.00	

Schedule EA: Assets Acquired

Date Acquired	Asset description & location	Amount	Manner Acquired
		\$0.00	
Total Assets listed above		\$0.00	

Schedule ED: Assets Disposed

Date Disposed	Asset description	Disposed To:	Value	Manner Disposed
			\$0.00	
Total Assets listed above			\$0.00	



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance
CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 15 PM 3:23

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Oct 19, 2019 Ending Date: Dec 31, 2019

Type of Report: (Check one)

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

Maya Jamaledine
Candidate Full Name (if applicable)
City Council
Office Sought and District
10 Melrose St. Melrose, MA 02176
Residential Address
E-mail: <u>mayaformelrose@gmail.com</u>
Phone # (optional): _____

Committee to Elect Maya Jamaledine
Committee Name
Joshua Robbins
Name of Committee Treasurer
10 Melrose St. Melrose, MA 02176
Committee Mailing Address
E-mail: <u>mayaformelrose@gmail.com</u>
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	1,516.02
Line 2: Total receipts this period (page 3, line 11)	961.34
Line 3: Subtotal (line 1 plus line 2)	2,477.36
Line 4: Total expenditures this period (page 5, line 14)	2,102.92
Line 5: Ending Balance (line 3 minus line 4)	374.44
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	750
Line 8: Name of bank(s) used: <u>Rockland Trust</u>	

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: _____ (Treasurer's signature)

Date: 1/1/2020

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: Maya (Candidate's signature)

Date: 1/5/2020

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)
Oct 21, 2019	Afroz Kahn 85 Prospect St. Newburyport, MA 01950	100	
Oct 22, 2019	Aijaz Baloch 229 Woodcliff Road Newton MA 02461	50	
Oct 19, 2019	Christina Eckert 14 Annas Way Boxford MA 01921	50	
Oct 20, 2019	Eileen Hamblin 150 Youle St. Melrose MA 02176	150	
Oct 20, 2019	Erin Zwirko 100 Derby Rd. Melrose MA 02176	50	
Oct 22, 2019	Jennifer Blackmon 17 Aborn Avenue Wakefield MA 01880	50	
Oct 21, 2019	Margot Fleischman 145 Page Road Bedford MA 01730	50	
Oct 21, 2019	Mehreen Butt 894 Main Street Unit 10 Wakefield MA 01880	50	
Oct 21, 2019	Shagufta Saeed 8 oak street Lynnfield MA 01940	50	
Line 9: Total Receipts over \$50 (or listed above)		600	
Line 10: Total Receipts \$50 and under* (not listed above)		361.34	
Line 11: TOTAL RECEIPTS IN THE PERIOD		961.34	← 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 A: RECEIPTS (continued)[illegible]

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

← 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 (continued)[illegible]

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

* 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
Mar 5, 2018	Maya Jamaledine	10 Melrose St. Melrose, MA 02176	Campaign Training	750
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

1/1/2019

Ending Date:

12/31/2019

Type of Report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☐ 30 day after election

☒ year-end report

☐ dissolution

Nancy Lewis

Candidate Full Name (if applicable)

Alderman, Ward 6

Office Sought and District

143 Laurel St Melrose MA

Residential Address

E-mail: nlewis143@gmail.com

Phone # (optional): 617-461-6018

Committee to Elect

Nancy Lewis Ward 6 Alderman

Committee Name

Kristin Bremberg

Name of Committee Treasurer

510 Fellsvie Ter #515 Stoneham MA

Committee Mailing Address

E-mail: Kristbrem@yahoo.com

Phone # (optional): 781-771-7700

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

637.54

Line 2: Total receipts this period (page 3, line 11)

—

Line 3: Subtotal (line 1 plus line 2)

—

Line 4: Total expenditures this period (page 5, line 14)

55.00

Line 5: Ending Balance (line 3 minus line 4)

582.54

Line 6: Total in-kind contributions this period (page 6)

—

Line 7: Total (all) outstanding liabilities (page 7)

—

Line 8: Name of bank(s) used:

—

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:

Kristin Bremberg

(Treasurer's signature)

Date: 1/21/2020

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:

Nancy M. Lewis

(Candidate's signature)

Date: 1/21/2020

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.)

[illegible]

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

← 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 A: RECEIPTS (continued)[illegible]

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

← 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
2/28/19	Rockland Trust		Dormant Fee	5—
3/29/19	"		"	5—
4/30/19	"		"	5—
5/31/19	"		"	5—
6/28/19	"		"	5—
7/31/19	"		"	5—
8/20/19	"		"	5—
9/30/19	"		"	5—
10/31/19	"		"	5—
11/29/19	"		"	5—
12/31/19	"		"	5—
Line 12: Total Expenditures over \$50 (or listed above)				—
Line 13: Total Expenditures \$50 and under* (not listed above)				55—
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				55—

* 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 B: EXPENDITURES (continued)[illegible]

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

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



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE

REGISTRARS OF VOTERS

2020 JAN -2 PM 2:00

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

5/2/19

Ending Date:

12/31/19

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

E-mail:

Phone # (optional):

One Melrose

Committee Name

David Eckler + Ellen McGlynn

Name of Committee Treasurer

PO Box 761249 Melrose MA 02176

Committee Mailing Address

E-mail: David.Eckler@Alumni.PSU.edu

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

5152.12

Line 2: Total receipts this period (page 3, line 11)

140.00

Line 3: Subtotal (line 1 plus line 2)

5292.12

Line 4: Total expenditures this period (page 5, line 14)

5292.12

Line 5: Ending Balance (line 3 minus line 4)

0

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used:

Eastern 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:

[Signature]

(Treasurer's signature)

Date:

12/14/19

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:

(Candidate's signature)

Date:


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.)

[illegible]

Line 9: Total Receipts over \$50 (or listed above)



Line 10: Total Receipts \$50 and under* (not listed above)

$$140 \frac{50}{100}$$

Line 11: TOTAL RECEIPTS IN THE PERIOD

$$140 \frac{00}{100}$$

← 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
On-going	Pay Pal	2211 N. First St. San Jose, CA 95131	Credit Card Processing Fees	1.98
7/15/19	Town of Melrose (MA) Emergency Fund	562 Main St. Melrose, MA 02176	Contribution - Closing the account	5290.14
Line 12: Total Expenditures over \$50 (or listed above)				5292.12
Line 13: Total Expenditures \$50 and under* (not listed above)				Ø
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				5292.12

* 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
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div>Enter on page 1, line 6 →</div> <div> Line 15: In-Kind Contributions over \$50 (or listed above) </div> </div>				
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div> </div> <div> Line 16: In-Kind Contributions \$50 & under (not listed above) </div> </div>				
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div> </div> <div> Line 17: TOTAL IN-KIND CONTRIBUTIONS </div> </div>				

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



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance
CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 16 AM 8:21

2020 Full Authority City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2019 Ending Date: 12/31/2019

Type of Report: (Check one)

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

PETER MORTIMER

Candidate Full Name (if applicable)

CITY COUNCIL WARD 6 MELROSE

Office Sought and District

47 MT. HOOD TER., MELROSE, MA 02176

Residential Address

E-mail: PETERMORTIMER@COMCAST.NET

Phone # (optional): 781-665-0286

COMMITTEE TO ELECT PETER MORTIMER

Committee Name

LISA MORTIMER

Name of Committee Treasurer

47 MT. HOOD TER., MELROSE, MA 02176

Committee Mailing Address

E-mail: LISAMORTIMER260@GMAIL.COM

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

696.59

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

696.59

Line 4: Total expenditures this period (page 5, line 14)

0

Line 5: Ending Balance (line 3 minus line 4)

696.59

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used: ROCKLAND TRUST

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: Lisa H. Mortimer (Treasurer's signature)

Date: 1/11/2020

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: Peter Mortimer (Candidate's signature)

Date: 1/11/2020

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.)

[illegible]

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		0	

← 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.)

[illegible]

* 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
			Line 12: Expenditures over \$50 (or listed above)	
			Line 13: Expenditures \$50 and under* (not listed above)	
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	0

* 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)	
			Line 16: In-Kind Contributions \$50 & under (not listed above)	
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
Enter on page 1, line 7 →		Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)		
				0



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 21 PM 1:51

File with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Oct 25, 2019 Ending Date: Dec 31, 2019

Type of Report: (Check one)

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

Peter Navarra	
Candidate Full Name (if applicable)	
City Council At Large	
Office Sought and District	
35 Crescent Ave #2, Melrose, MA 02176	
Residential Address	
E-mail:	pete.i.navarra@gmail.com
Phone # (optional):	

Pete Navarr for Melrose	
Committee Name	
Theresa Navarra	
Name of Committee Treasurer	
35 Crescent Ave #2, Melrose, MA 02176	
Committee Mailing Address	
E-mail:	pete.i.navarra@gmail.com
Phone # (optional):	781-462-1720

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	14.44
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, line 14)	14.44
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	Melrose 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: [Signature] (Treasurer's signature) Date: Jan 21, 2020

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: [Signature] (Candidate's signature) Date: Jan 21, 2020

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)
Line 9: Total Receipts over \$50 (or listed above)			← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

* 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 A: RECEIPTS (continued)[illegible]

* 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.)

[illegible]

* 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 B: EXPENDITURES (continued)[illegible]

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

* 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.

[illegible]



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 17 AM 9:02

File with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/19/2019 Ending Date: 12/31/2019

Type of Report: (Check one)

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

Robert E. Aufiero

Candidate Full Name (if applicable)

City Councilor Ward 6 - Melrose, MA

Office Sought and District

425 Lebanon St. Melrose, MA 02176

Residential Address

E-mail: rob821af@yahoo.com

Phone # (optional): 781-307-1494

Friends of Robert E. Aufiero

Committee Name

Daniel C. Fusco

Name of Committee Treasurer

425 Lebanon St. Melrose, MA 02176

Committee Mailing Address

E-mail: danielc.fusco@verizon.net

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

\$ 1,246.62

Line 2: Total receipts this period (page 3, line 11)

\$ 126.75

Line 3: Subtotal (line 1 plus line 2)

\$ 1,373.37

Line 4: Total expenditures this period (page 5, line 14)

\$ 1,073.25

Line 5: Ending Balance (line 3 minus line 4)

\$ 300.12

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used:

Eastern 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:

(Treasurer's signature)

Date: 1/15/20

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:

(Candidate's signature)

Date: 01/08/2020

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)
10/30/2019	CTE Jerry Leone 91 Webster St. Malden, Ma. 02148	51.75	
Line 9: Total Receipts over \$50 (or listed above)		51.75	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)		75	
Line 11: TOTAL RECEIPTS IN THE PERIOD		126.25	

* 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 A: RECEIPTS (continued)[illegible]

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

← 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
10/24/2019	Dan Allie	38 Union St. Westfield, Ma. 01085	Mailer Design	342.75
10/28/2019	Tiger Press	50 Industrial Dr. Longmeadow, Ma. 01028	Postage - Mailhouse	499.02
10/24/2019	Minuteman Press	988 Eastern Ave. Malden, Ma. 02148	Pushcards	159.38
Line 12: Total Expenditures over \$50 (or listed above)				1,001.15
Line 13: Total Expenditures \$50 and under* (not listed above)				72.1
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1,073.25

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 B: EXPENDITURES (continued)[illegible]

* 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.

[illegible]

* 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.

[illegible]

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

Page 7



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report
Office of Campaign and Political Finance
CITY OF MELROSE
REGISTRARS OF VOTERS

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

2020 JAN 21 PM 3:14 CPF ID# 17272

Reporting Period: Beginning: 10/29/2019 Ending: 12/31/2019

Type of Report: 2019 Year-end Report

Stewart, Robert E.

Full Name of Candidate

Municipal, Local Filer

Office Sought/ District

92 Trenton Street
Melrose, MA 02176

Residential Address

Stewart Company

Committee Name

Shannon Elizabeth Stamegna

Name of Committee Treasurer

15 Cleveland Street
Melrose, MA 02176

Committee Address

SUMMARY BALANCE INFORMATION

Ending balance from previous report:	\$324.50
Total receipts this period:	\$25.00
Subtotal:	\$349.50
Total expenditures this period:	\$55.78
Ending Balance:	\$293.72
Total inkind contributions this period:	\$0.00
Total out of pocket spending this period:	\$0.00
Total outstanding liabilities:	\$0.00
Name of Bank Used:	

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:

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, 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:

Candidate's signature (in ink)

Date

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>
10/29/2019	Thomas, Ken	\$25.00	
	Melrose, MA 02176		

Total Itemized Receipts:	\$25.00
Total Unitemized Receipts:	\$0.00
Total Receipts:	<u>\$25.00</u>

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 Address</u>	<u>Amount</u>	<u>Purpose</u>
10/31/2019	Melrose Cooperative Bank 638 Main Street Melrose, MA 02176	\$18.00	Checking Acct Fees
11/29/2019	Melrose Cooperative Bank 638 Main Street Melrose, MA 02176	\$18.00	Checking Account Fee
12/31/2019	Melrose Cooperative Bank 638 Main Street Melrose, MA 02176	\$18.00	Checking Acct Fee
10/29/2019	Stripe, Inc 3180 18th Street San Francisco, CA 94110	\$1.78	Fees
Total Itemized Expenditures:		\$55.78	
Total Unitemized Expenditures:		\$0.00	
Total Expenditures:		\$55.78	



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

2020 JAN 21 PM 3:08

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/19/2019 Ending Date: 12/31/2019

Type of Report: (Check one)

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

Ryan Williams
Candidate Full Name (if applicable)
Melrose City Councilor - Ward 7
Office Sought and District
88 Malvern Street, Melrose MA 02176
Residential Address
E-mail: <u>ryan@ryanformelrose.com</u>
Phone # (optional): _____

Citizens for Ryan Williams
Committee Name
Amber Williams
Name of Committee Treasurer
88 Malvern Street, Melrose MA 02176
Committee Mailing Address
E-mail: <u>ryan@ryanformelrose.com</u>
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	-32.27
Line 2: Total receipts this period (page 3, line 11)	465
Line 3: Subtotal (line 1 plus line 2)	432.73
Line 4: Total expenditures this period (page 5, line 14)	16.44
Line 5: Ending Balance (line 3 minus line 4)	416.29
Line 6: Total in-kind contributions this period (page 6)	478.01
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	Eastern Bank, Paypal

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: Amber Williams (Treasurer's signature)

Date: 1/20/2020

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: [Signature] (Candidate's signature)

Date: 1/20/2020

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)
10/24/2019	Brett Hitchner 115 Bartlett St, Apt 2 Somerville, MA 02145	55	
10/21/2019	Jennifer Champagne 11 Faxon Street, Melrose MA 02176	55	
10/19/2019	Ryan Williams 88 Malvern Street Melrose MA 02176	300	Fundraiser - EDF
10/25/2019	Timothy Calabrese 1 kingsbury Road Canton MA 02021	55	
Line 9: Total Receipts over \$50 (or listed above)		465	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		465	

* 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 A: RECEIPTS (continued)[illegible]

* 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
		Line 12: Total Expenditures over \$50 (or listed above)		
		Line 13: Total Expenditures \$50 and under* (not listed above)		16.44
Enter on page 1, line 4 →		Line 14: TOTAL EXPENDITURES IN THE PERIOD		

* 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 B: EXPENDITURES (continued)[illegible]

* 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
10/23/2019	Ryan Williams	88 Malvern Street	Campaign Materials	415.44
		Line 15: In-Kind Contributions over \$50 (or listed above)		415.44
		Line 16: In-Kind Contributions \$50 & under (not listed above)		37.18
Enter on page 1, line 6 →		Line 17: TOTAL IN-KIND CONTRIBUTIONS		478.01

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



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: 1/1/2019 Ending Date: 12/31/2019

Type of Report: (Check one)

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

SCOTT M. FORBES
Candidate Full Name (if applicable)
MELROSE CITY COUNCIL - WARD 7
Office Sought and District
41 MYSTIC AVENUE
Residential Address
E-mail: <u>storbes789@gmail.com</u>
Phone # (optional): <u>(978) 873-0916</u>

NO COMMITTEE
Committee Name
N/A
Name of Committee Treasurer
N/A
Committee Mailing Address
E-mail: <u>N/A</u>
Phone # (optional): <u></u>

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$0.00
Line 2: Total receipts this period (page 3, line 11)	\$0.00
Line 3: Subtotal (line 1 plus line 2)	\$0.00
Line 4: Total expenditures this period (page 5, line 14)	\$0.00
Line 5: Ending Balance (line 3 minus line 4)	\$0.00
Line 6: Total in-kind contributions this period (page 6)	\$0.00
Line 7: Total (all) outstanding liabilities (page 7)	\$0.00
Line 8: Name of bank(s) used:	NO BANK ACCOUNTS / NOT APPLICABLE

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: _____ (Treasurer's signature) Date: _____

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: _____ (Candidate's signature) Date: 1/22/2020

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)
Line 9: Total Receipts over \$50 (or listed above)			← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$0.00	

* 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$0.00 ← 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.)

[illegible]

* 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 B: EXPENDITURES (continued)[illegible]

* 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)		
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
Enter on page 1, line 6 →		Line 17: TOTAL IN-KIND CONTRIBUTIONS	\$0.00	

* 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
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	\$0.00



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: 10/29/19 Ending Date: 12/31/19

Type of Report: (Check one)

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

Shawn Michael MacMaster Candidate Full Name (if applicable)	Committee To Elect Shawn MacMaster Committee Name
City Councilor - Ward 5 Office Sought and District	Shannon MacMaster Name of Committee Treasurer
35 Brazil Street Residential Address	35 Brazil Street Committee Mailing Address
E-mail: <u>smacmaster2013@gmail.com</u>	E-mail: <u>skeenan76@me.com</u>
Phone # (optional): _____	Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	271.88
Line 2: Total receipts this period (page 3, line 11)	42.94
Line 3: Subtotal (line 1 plus line 2)	314.82
Line 4: Total expenditures this period (page 5, line 14)	97.94
Line 5: Ending Balance (line 3 minus line 4)	216.88
Line 6: Total in-kind contributions this period (page 6)	0.00
Line 7: Total (all) outstanding liabilities (page 7)	2,542.94
Line 8: Name of bank(s) used: <u>Eastern Bank</u>	

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: Shannon MacMaster (Treasurer's signature) Date: 1/21/2020

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: [Signature] (Candidate's signature) Date: 1-21-20

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)
12/10/19	Shawn MacMaster 35 Brazil Street Methuen, MA 01840	42.94	
Line 9: Total Receipts over \$50 (or listed above)		42.94	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		42.94	

* 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)			← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		42.94	

* 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
12/10/19	Photo Affections	2303 RR 620 South Suite 135-198 Austin, TX 78734	Christmas Cards	42.94
12/14/19	USPS	23 Essex Street Melrose, MA 02176	Stamps for Christmas Cards	55.00
Line 12: Total Expenditures over \$50 (or listed above)				97.94
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				97.94

* 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 B: EXPENDITURES (continued)[illegible]

* 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.

[illegible]

* 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
5/17/19	Shawn MacMaster	35 Brazil Street Melrose, MA 02176	Candidate loan	500.00
6/25/19	Shawn MacMaster	35 Brazil Street Melrose, MA 02176	Candidate loan	2,000.00
12/10/19	Shawn MacMaster	35 Brazil Street Melrose, MA 02176	Candidate loan	42.94
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				2,542.94