



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE
REGISTRARS OF VOTERS

2019 OCT 28 PM 12:24

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 3/15/2018 Ending Date: 10/18/2019

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 Street, Melrose, MA 02176

Residential Address

E-mail: mayaformelrose@gmail.com

Phone # (optional):

Committee to Elect Maya Jamaladdine

Committee Name

Joshua Robbins

Name of Committee Treasurer

10 Melrose Street, Melrose MA 02176

Committee Mailing Address

E-mail: mayaformelrose@gmail.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	5,507
Line 3: Subtotal (line 1 plus line 2)	5,507
Line 4: Total expenditures this period (page 5, line 14)	3,990.98
Line 5: Ending Balance (line 3 minus line 4)	1,516.02
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:	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: _____ (Treasurer's signature)

Date: 10/26/19

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: _____ (Candidate's signature)

Date: 10/27/19

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
7/23/2019	Aaron Beitman 35 Leonard Road Melrose, MA 02176	72	
7/31/2019	Afroz Khan 85 Prospect St. Newburyport, MA 01950	50	
4/22/2019	Ahmed Abraou 849 Main st Melrose, MA 02176	100	
8/4/2019	Aicha Ouajdi 16 Baxter St. Melrose, MA 02176	50	
6/3/2019	Betsy Garrett 70 Ardsmoor Rd Melrose, ma 02176	70	Not Employed
4/16/2019	Betsy Garrett 70 Ardsmoor Rd Melrose, ma 02176	100	Not Employed
4/21/2019	Christina Eckert 14 Annas Way Boxford, MA 01921	50	
7/29/2019	Deborah Anderson 63 Morgan St. Melrose, MA 02176	50	
5/10/2019	Eddie Reyes P.O. Box 216 Malden, MA 02148	50	
6/11/2019	Eileen Hamblin 150 Youle Street Melrose, MA 02176	100	
7/31/2019	Elizabeth Rupert 112 West Wyoming Ave Melrose, MA 02176	50	
10/14/2019	Elizabeth Rupert 112 West Wyoming Ave Melrose, MA 02176	130	
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

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 Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/18/2019	Rachael Rollins 4 Fort Ave Terrace #2 Roxbury, MA 02119	250	District Attorney Suffolk County District Attorney
6/25/2019	Sally Stubbs 111 WARWICK ROAD MELROSE, MA 02176	50	
9/4/2019	Saritin Rizzuto 122 farm street Wakefield, MA 01880	100	
7/31/2019	Tirzah Deering 333 Washington St. Melrose, MA 02176	50	
5/22/2019	Tracey Cruickshank 22 Martin Street Melrose, MA 02176	50	
10/6/2019	Tuggelin Yourgrau 21 Geneva Road MELROSE, MA 02176	50	
6/29/2019	Yael Mazor-Garfinkle 184 Florence St Melrose, MA 02176	50	
Line 9: Total Receipts over \$50 (or listed above)		4,422	
Line 10: Total Receipts \$50 and under* (not listed above)		1,085	
Line 11: TOTAL RECEIPTS IN THE PERIOD		5,507	← 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)
7/31/2019	James Scott 112 W Wyoming Ave Melrose, MA 02176	50	
5/1/2019	Jane Allen 178 East Foster Street Melrose, MA 02176	100	
7/8/2019	Jane Allen 178 East Foster Street Melrose, MA 02176	50	
6/11/2019	Julie Smith-Galvin 28 Grafton street Wakefield, MA 01880	50	
6/17/2019	Katherine Kennedy 103 Mt. Vernon Ave Melrose, MA 02176	50	
5/11/2019	Khadija Tlalti 5 Nordic Way Melrose, MA 02176	100	
6/13/2019	Kristina Pechulis 46 Reading Hill Avenue Melrose, MA 02176	50	
5/22/2019	Liza Weinstein 85 Otis Street Melrose, MA 02176	50	Professor, Northeastern University
6/11/2019	Liza Weinstein 85 Otis Street Melrose, MA 02176	50	Professor, Northeastern University
7/11/2019	Liza Weinstein 85 Otis Street Melrose, MA 02176	50	Professor, Northeastern University
8/11/2019	Liza Weinstein 85 Otis Street Melrose, MA 02176	50	Professor, Northeastern University
9/11/2019	Liza Weinstein 85 Otis Street Melrose, MA 02176	50	Professor, Northeastern University
10/11/2019	Liza Weinstein 85 Otis Street Melrose, MA 02176	50	Professor, Northeastern University
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.

COMMITTEE TO ELECT MAYA JAMALEDDINE

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8/1/2019	MA Womens Political Caucus 89 South St., Ste 603 Boston, MA 02111	100	
10/2/2019	Martha Grover 31 Gooch Street Melrose, MA 02176	50	
6/11/2019	Maureen Buzby 54 West Highland Ave Melrose, MA 02176	100	
3/15/2018	Maya Jamaledine 10 Melrose st Melrose, MA 02176	750	Intensive Case Manager Elliot Community Human Services
9/23/2019	Meghan Rosenberg 117 Florence St Melrose, MA 02176	50	
5/10/2019	Mike and Erin Zwirko 100 Derby Rd Melrose, MA 02176	100	
5/22/2019	Mike Stankavish 9 Harding Rd Melrose, MA 02176	500	Attorney North Shore Elder Law and Estate Planning
5/6/2019	Nadia Butt 8 Christopher Street Stoneham, MA 02180	100	
10/8/2019	Nandini Talwar 31 Stevens Road Melrose, MA 02176	50	
7/29/2019	Nathan Faro 90 Walton Park Melrose, MA 02176	100	
8/1/2019	Patty Anderson 39 Church St Winchester, MA 01890	50	
7/31/2019	Paul Flaherty 40 Poplar St Melrose, MA 02176	50	Not Employed
9/23/2019	Paul Flaherty 40 Poplar St Melrose, MA 02176	200	Not Employed

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.

COMMITTEE TO ELECT MAYA JAMALADDINE

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
6/12/2019	Bobby C's Ristorante	20 Main St Melrose MA 02176	Food for Kickoff Party	227.76
5/30/2019	Cambridge Reprographics	21 McGrath Hwy Somerville MA 02143	500 palm cards for canvassing	143.13
6/27/2019	Cambridge Reprographics	21 McGrath Hwy Somerville MA 02143	1000 palm cards for canvassing	213.41
9/18/2019	Cambridge Reprographics	21 McGrath Hwy Somerville MA 02143	2000 palm cards for canvassing	296.16
9/30/2019	Cambridge Reprographics	21 McGrath Hwy Somerville MA 02143	Yard Signs	796.9
9/12/2019	Connolly Printing	178 Gill St. Woburn MA 01801	100 bumper magnets	206.13
3/15/2018	Emerge	15 Court Sq. #900 Boston MA 02108	Campaign Training	750
6/7/2019	Massachusetts Democratic Party	11 Beacon St., Suite 410 Boston MA 02108	VotBuilder - Data tool for canvassing	600
6/21/2019	Melrose Chamber of Commerce	1 W Foster St Melrose MA 02176	victorian fair booth fee	150
9/3/2019	Tee Shirt Guy	35 Russell St. Melrose MA 02176	Custom T-shirts	240
6/3/2019	wacky buttons	101 Lincoln Pkwy, Suite A E. Rochester NY 14445	Campaign Buttons	70
Line 12: Total Expenditures over \$50 (or listed above)				3,824.98
Line 13: Total Expenditures \$50 and under* (not listed above)				297.46
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				3,990.98

* 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
3/15/2018	Maya Jamaledine	10 Melrose St Melrose, MA 02176	Campaign Training	750
<div style="display: flex; justify-content: space-between; align-items: center;"> Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL) </div>				750