

Form CPF M 102: Campaign Finance Report

Municipal Form
Office of Campaign and Political Finance

CITY OF MELROSE REGISTRABE OF VOTERS

2010 OCT 28 AM 8:53

	File with: City or Town Clerk or Election Commission				
Fill in Reporting Period dates: Beginning Date: 7/2	7/22/19 Ending Date: 10/18/19				
Type of Report: (Check one)					
8th day preceding preliminary 8th day preceding election	on 30 day after election year-end report dissolution				
Jeffrey Charles McNaught	Committee to Elect Jeffrey C McNaught				
Candidate Full Name (if applicable)	Committee Name				
Ward 2 City Council	Kathryn McNaught				
Office Sought and District	Name of Committee Treasurer				
94 Clifford Street, Melrose, MA 02176	94 Clifford Street, Melrose, MA 02176				
Residential Address	Committee Mailing Address				
E-mail: melroseward2@gmail.com	E-mail: kt02363367@yahoo.com				
Phone # (optional):	Phone # (optional):				
SUMMARY BALAI	ANCE INFORMATION:				
Line 1: Ending Balance from previous report	0				
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)					
Line 5: Ending Balance (line 3 minus line 4)					
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: Northern Bank, Melrose, MA					
Affidavit of Committee Treasurer:					
I certify that I have examined this report including attached schedules and it is, to the	the best of my knowledge and belief, a true and complete statement of all campaign finance -kind contributions and liabilities for this reporting period and represents the campaign tree in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 0 25				
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check	k 1 box only)				
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to activity, of all persons acting under the authority or on behalf of this committee in incurred any liabilities nor made any expenditures on my behalf during this report	to the best of my knowledge and belief, a true and complete statement of all campaign finance in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, porting period that are not otherwise disclosed in this report.				
	·				
Signed under the penalties of perjury	Date: Oct 25, 2019				

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.)

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
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1			
		NAME	
- Anna Anna Anna Anna Anna Anna Anna Ann			
Valoritation			
ine 9: Total Receip	ots over \$50 (or listed above)		
ine 10: Total Recei	pts \$50 and under* (not listed above)		1
ine 11: TOTAL R	ECEIPTS IN THE PERIOD		Foton on page 1. live 2
	receipts of \$50 and and an include them in line		← 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)
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	Name of the state		
7			
77			
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Recei	pts \$50 and under* (not listed above)		
Line 11: TOTAL R	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2
If you have itemized	receipts of \$50 and under include them in lin	a O Lina 10 show	Id include only those receipts not itemized above.

^{*} 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	Amount	
	(white and the state of		Purpose of Expenditure	AMMUNIC
Sep 5, 2019	Sachem Signworks	124 Main Street, Saugus, MA 01906	Campaign Lawn Signs	377
Sep 23, 2019	Connolly Printing	178 Gill Street, Woburn, MA 01801	Campaign Bookmark/Door Literature	409.06
7				***************************************

		Line 12: Total Expenditures or	ver \$50 (or listed above)	786.06
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	44.14
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	830.2

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

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SCHEDULE B: EXPENDITURES (continued)

To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
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		Line 12: Expenditures over \$50	0 (or listed above)		
Line 13: Expenditures \$50 and under* (not listed above)					
Line 13. Expenditures \$50 and dider (not fisted 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					

^{*} 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	on Value
Aug 8, 2019	Suzanne Thistle	69 High Street, Stoneham, MA	100
Aug 9, 2019	Thomas Moylan	98 Clifford Street, Melrose, MA	100
Aug 9, 2019	Jill Leeman	79 Boardman Street, Melrose, MA	100
Aug 9, 2019	Ward Hamilton	87 East Emerson Street, Melrose, MA	500
Aug 10, 2019	Stephen McNaught Sr.	8 Philips Road, Stoneham, MA	250
Aug 10, 2019	Laurie Briggs	10003 Paradise Ridge Road, Charlotte, NC	100
Aug 10, 2019	Gerard McNaught	9535 Blakeney Heath Road, Charlotte, NC	250
Aug 10, 2019	Ellen Cosgrove	579 North Brooksvale Road, Chesire, CT	100
Aug 17, 2019	Christopher Cinella	69 Cranmore Lane, Melrose, MA	100
Aug 17, 2019	James Grafton Jr	43 Cranmore Lane, Melrose, MA	100
Sep 21, 2019	Scott Searles	41 Sears Ave, Melrose, MA	100
Sep 21, 2019	Joe Annaletto	31 Pratt Street, Meirose, MA	100
Line 15: In-Kind Contributions over \$50 (or listed above)			2,550
Line 16: In-Kind Contributions \$50 & under (not listed above)			ve) 275
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.

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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.

	Amount	Purpose	**************************************	Address	To Whom Due	Date Incurred
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Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)						

10/27/2019	:11:	in kind Capture,PNG	IN-KIND	CONTRIBUTIONS.
Sep 21, 2019	Stephen McNaught Jr	425 Salem Street, Lynnfield, MA		100
Sep 21, 2019	Sheila McNeil	5 Country Club Lane, Middleton, MA		300
Oct 15, 2019	Stephen McNaught Sr.	8 Philips Road, Stopeham, MA	Addressed to consistence of the factor of the constraint of the co	STO