

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

REGISTRADS OF VOTERS

of Massachusetts		File with: City of Town	w Clerk or Efection Commission
Fill in Reporting Period dates: Beginning Date: 1/1/2	019	Ending Date: 10/18/20	,,,
Type of Report: (Check one)  ☐ 8th day preceding preliminary  ☐ 8th day preceding election	30 day	after election year-end rep	ort [] dissolution
Kate Lipper-Garabedian	Commit	ttee to Elect Kate Lipper-Garabedia	n
Candidate Full Name (if applicable)		Committee Name	
Councilor-at-Large	Lisa Sul	llivan Ballew	
Office Sought and District		Name of Committee Treas	surer
21 Mystic Ave., Melrose, MA 02176	20 Myst	tic Ave., Melrose, MA 02176	
Residential Address E-mail: kateformelrose@gmail.com	E-mail:	Committee Mailing Addr kateformelrose@gr	
			nan.com
Phone # (optional):	Phone # (	optional):	
SUMMARY BALANC	E INFO	RMATION:	
Line 1: Ending Balance from previous report		1,	605.78
Line 2: Total receipts this period (page 3, line 11)	Line 2: Total receipts this period (page 3, line 11)		10,469
Line 3: Subtotal (line 1 plus line 2)		12,	074.78
Line 4: Total expenditures this period (page 5, line 14)		5,	996.02
Line 5: Ending Balance (line 3 minus line 4)		6,	078.76
Line 6: Total in-kind contributions this period (pa	ige 6)		337.88
Line 7: Total (all) outstanding liabilities (page 7)		100000000000000000000000000000000000000	0
Line 8: Name of bank(s) used: Eastern Bank	A		
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penaltics of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 both activity, of all persons acting under the authority or on behalf of this committee in activity, of all persons acting under the authority or on behalf of this committee in activity and liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this committee.	e best of my kes, in-kind con	and liabilities for this reporting period and a with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date of the requirements of M.G.L. c. 55.  In the requirements of M.G.L. c. 55. I have a sure not otherwise disclosed in this report.  Conowledge and belief, a true and complete state of the requirements of the reporting period of the requirements of M.G.	ate: 10/21/19  atement of all campaign finance not received any contributions,  atement of all campaign eriod and represents the L. c. 55.
Signed under the panelties of perjury:		(Candidate's signature)	ate: 10.25.19

#### **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.)

report all receipts. Please include your committee name and a page number on each page.)					
l .	Amount	Occupation & Employer (for contributions of \$200 or more)			
(alphabetical listing required)	Amoun	(101 CONTIDUCIONS OF \$200 OF INOTE)			
Anderman, Jonathan, 30 Hanson St. #3, Boston, MA	300	Unemployed			
Annese, Caroline, 52 Mystic Ave., Melrose MA	50				
Bagley, Maura, 45 Norman Rd, Melrose, MA	25				
Bowers, Danielle, 245 Tremont St., Melrose, MA	25				
Brinchiero, Nancy and Frank, Geneva Way, Melrose, MA	100				
Britt, Megan, 79 Burrell Street, Melrose, MA	100				
Chen, Julia, 39 Woodland Ave, Melrose, MA	100				
Coleman, James, 1576 Sophia Lane, Smyrna, GA	100				
Collins, Kathleen, 192 W Wyoming Ave Melrose, MA	100				
Cook, Nancy, 24 Mystic Ave., Melrose, MA	20				
Cruickshank, Tracey, 22 Martin St., Melrose, MA	50				
Dellaripa Rosenberg, Joanna, 51 Poplar St., Melrose, MA 02176	50				
ripts over \$50 (or listed above)	1,020				
eipts \$50 and under* (not listed above)					
RECEIPTS IN THE PERIOD	12 A	← Enter on page 1, line 2			
	Annese, Caroline, 52 Mystic Ave., Melrose MA  Bagley, Maura, 45 Norman Rd, Melrose, MA  Bowers, Danielle, 245 Tremont St., Melrose, MA  Brinchiero, Nancy and Frank, Geneva Way, Melrose, MA  Britt, Megan, 79 Burrell Street, Melrose, MA  Chen, Julia, 39 Woodland Ave, Melrose, MA  Coleman, James, 1576 Sophia Lane, Smyrna, GA  Collins, Kathleen, 192 W Wyoming Ave Melrose, MA  Cook, Nancy, 24 Mystic Ave., Melrose, MA  Cruickshank, Tracey, 22 Martin St., Melrose, MA  Dellaripa Rosenberg, Joanna, 51 Poplar St., Melrose, MA 02176  Eipts over \$50 (or listed above)  eipts \$50 and under* (not listed above)	(alphabetical listing required)AmountAnderman, Jonathan, 30 Hanson St. #3, Boston, MA300Annese, Caroline, 52 Mystic Ave., Melrose MA50Bagley, Maura, 45 Norman Rd, Melrose, MA25Bowers, Danielle, 245 Tremont St., Melrose, MA25Brinchlero, Nancy and Frank, Geneva Way, Melrose, MA100Chen, Julia, 39 Woodland Ave, Melrose, MA100Coleman, James, 1576 Sophia Lane, Smyrna, GA100Collins, Kathleen, 192 W Wyoming Ave Melrose, MA100Cook, Nancy, 24 Mystic Ave., Melrose, MA20Cruickshank, Tracey, 22 Martin St., Melrose, MA 0217650Dellaripa Rosenberg, Joanna, 51 Poplar St., Melrose, MA 0217650sipts over \$50 (or listed above)1,020cipts \$50 and under* (not listed above)			

<sup>\*</sup> 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)
9/17/2019	Doctoroff, Eddie, 92 Quincy Ave., Winthrop, MA	60	
6/3/2019	Donaldson, Ainsley, 44 Marmion Road, Melrose, MA	75	
6/29/2019 and 9/18	Donnelly, Timothy, 79 Sheffield Rd, Melrose, MA	75	
9/30/2019	Downes, Sena, 80 Morgan St., Melrose, MA	25	
10/11/2019	Early, Shane, 30 Temple St. Unit 1, Boston, MA	500	General Counsel, Dept. of Public Utilities
6/8/2019	Edds, Rachel, 106 Oakdale Rd., Baltimore, MD	1,000	Retired; aunt of candidate
6/8/2019	Falbo, Christopher, 1029 Franklin Street, Melrose, MA	25	
6/6/2019	Fuentes, Rebecca, 2 Allen PI, Melrose, MA	50	
6/18/2019	Golub, Mark and Alice, 15 Howard St., Melrose, MA	25	
9/24/2019	Greski, Rick and Denice, 23 Brazil St, Melrose, MA	100	
6/5/2019	Grigoraitis, Jennifer, 419 Lebanon Street, Melrose, MA	50	
6/2/2019	Guarino, Joseph, 22 Clinton Rd., Melrose, MA	25	
9/18/2019	Halloran, Lisa, 27 Whittier St Melrose, MA	20	
Line 9: Total Rece	ipts over \$50 (or listed above)	2,030	
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		Enter on page 1, line 2

<sup>\*</sup> 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.

(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.)

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)		
Date Received	(arphabetical listing required)	Amount	(101 CORT BULLONS OF \$200 OF MOTC)		
6/25/2019	Hamblin, Eileen, 150 Youle St, Melrose, MA	200	Broker/Owner, Leading Edge Realty		
10/12/2019	Hammar, Samantha, 12 Bartlett St, Melrose, MA	50			
6/2/2019	Infurna, Gail, 198 Boston Rock Rd, Melrose, MA	25			
9/18/2019	Interbartolo, Rebecca, 33 Woodland Ave, Melrose, MA	20			
6/3/2019	Jones, Steven, 22 South Ave, Melrose, MA	20			
6/2/2019	Klunder, Nita, 73 Wentworth, Melrose, MA 02176	20			
6/7/2019	Knight, Stormi, 39 Mystic Ave, Melrose, MA	50			
9/25/2019	Leo, Alan and Sheri, 77 Florence Ave., Melrose, MA	100			
6/18/2019	Lipper, Bob and Edds, Margaret, 3135 Grove Ave., Meirose, MA Pulhmml, VA	1,000	Retired; parents of candidate		
9/9/2019	Loveland, Lisa, 188 Florence Street, Melrose, MA	50			
6/10/2019	Mau, Manet, 8 Mystic Ave., Melrose, MA	50			
6/2/2019	McAndrew, Jennifer, 12 Sears Ave., Melrose, MA	50			
Line 9: Total Reco	eipts over \$50 (or listed above)	1,635			
Line 10: Total Rec	eipts \$50 and under* (not listed above)				
Line 11: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2		
If you have itemize	ed receipts of \$50 and under include them in line	e 9 Line 10 show	ld 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)
9/21/2019	McLaughlin, John, 40 Orchard Ln, Melrose, MA	200	Owner, McLaughlin Insurance
6/2/2019	Moore, Katherine, 35 Laurel St, Melrose, MA	50	
6/30/2019	Murphy, Nick, 121 Conant Rd., Melrose, MA	50	
8/5/2019	Nichols, Michael, 120 Mountford St #101, Boston, MA	200	Executive Director, Esplanade Foundation
6/19/2019	O'Connor, Matt and Ann, 374 Lebanon St., Melrose, MA	100	
6/18/2019	Sherman, Meredith, 2000 Thorncrag Ln, Midlothian, VA	100	
6/18/2019	Slayback, Michael, 2 Adams Ave, Merrimack, NH	99	
6/2/2019	Stewart, Robb, 92 Trenton, Melrose, MA	50	
7/18/2019	Talieri, Richard, 39 Beech Ave., Melrose, MA	50	
9/23/2019	Taplin, Rebecca, 629 Lynn Fells Pkwy # 2 Melrose, MA	25	
9/18/2019	Treece, Victoria, 11 Bartlett St., Melrose, MA 02176	20	
7/9/2019	Truesdale, Ken, 85 RIchardson Rd, Melrose, MA	40	
8/7/2019	Varney, Robert, 153 Linwood Ave, Melrose, MA	100	
Line 9: Total Rece	ipts over \$50 (or listed above)	1,084	
Line 10: Total Reco	eipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		Enter on page 1, line 2

<sup>\*</sup> 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**

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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)		
9/19/2019	Vines, Kathryn, 43 Howard Street, Melrose, MA	100			
6/28/2019	Vujanic, Anica, 677 Massachusetts Ave., Apt. 4, Boston, MA	200	Owner, Tadpole Toys		
7/18/2019	Zwirko, Mike, 100 Derby Rd, Melrose, MA	150			
5/10, 7/10/, 9/4/20	Lipper-Garabedian, Kate, 21 Mystic Ave., Melrose, MA	3,780	Candidate		
		1			
Control of the Contro					
Line 9: Total Rece	ipts over \$50 (or listed above)	4,230			
Line 10: Total Rece	eipts \$50 and under* (not listed above)	470			
	RECEIPTS IN THE PERIOD	10,469	← Enter on page 1, line 2		

#### **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
6/13/2019	4Imprint	101 Commerce Street , Oshkosh, WI 54901	Tee shirts	153.89
6/2/2019	Cloud 9 Ice Cream	40 W. Wyoming Ave., Melrose, MA	Ice cream social	247.6
7/12/2019	Connolly Printing	178 Gill St, Woburn, MA 01801	Postcard and postage	2,099.96
10/15/2019	Connolly Printing	178 Gill St, Woburn, MA 01801	Standout signs	253.73
5/21/2019	Hillside Press	192 Green St., Melrose, MA	Palm cards and window signs	982.82
6/16/2019	Hillside Press	192 Green St., Melrose, MA	Printed envelopes	264.04
10/17/2019	Hillside Press	192 Green St., Melrose, MA	Dear Friend postcards	212.5
3/15/2019	Massachusetts Democratic Party	11 Beacon St Suite 410, Boston, MA 02108	License for Votebuilder	700
5/22/2019	Melrose Chamber of Commerce	1 W Foster St # 8, Melrose, MA	Victorian Fair registration, etc.	275
9/3/2019	Melrose Police Department	56 W Foster St, Melrose, MA	Fundraiser sponsorship	100
5/8/2019	Melrose Public Schools	360 Lynn Fells Pkwy, Melrose, MA	Drama program sponsorship	65
9/4/2019	Melrose Veterans Office	562 Main St, Melrose, MA	Fundraiser sponsorship	100
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	5,454.54
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	

<sup>\*</sup> 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)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Duit Luiv	(uipianetteai listing)	Truckes	Turpose of Experience	Amoun
6-9/2019	Paypal	2211 N. 1st St. San Jose, CA	Fees	81.76
6/24/2019	Staples	444 Broadway, Saugus, MA	Copies, envelopes, and stamps	392.2
		Line 12: Expenditures over \$50	O (or listed above)	473.96
		Line 13: Expenditures \$50 and	under* (not listed above)	67.52
		Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD hould include only those expenditures	5,996.02

<sup>\*</sup> 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
3/27/2019	Kate Lipper-Garabedian	21 Mystic Ave., Melrose, MA	Little League Sponsorship	200
4/25/2019	Kate Lipper-Garabedian	21 Mystic Ave., Melrose, MA	Managed website renewal	119.88
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		Line 15: In-Kind Contribution	as over \$50 (or listed above)	319.88
			s \$50 & under (not listed above)	18
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND (	CONTIDIUTIONS	337.88

<sup>\*</sup> 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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