



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE  
RECORDERS OF VOTERS

2021 JAN 20 PM 1:44

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/2020 Ending Date: 12/31/2020

## Type of Report: (Check one)

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

Lizbeth Celeste DeSelm  
Candidate Full Name (if applicable)  
Melrose School Committee  
Office Sought and District  
33A South High St  
Residential Address  
E-mail: soapchemist@gmail.com  
Phone # (optional): \_\_\_\_\_

Committee to Elect Lizbeth DeSelm  
Committee Name  
Elizabeth Benagh  
Name of Committee Treasurer  
33A South High St  
Committee Mailing Address  
E-mail: \_\_\_\_\_  
Phone # (optional): \_\_\_\_\_

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

1527.56

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)

946.01

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

581.55

581.55

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: 19 Jan 2021

## 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: \_\_\_\_\_

## 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 B: EXPENDITURES (continued)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
1/14/20	Benagh, Andrew	11 Alma St Lowell, MA	Photography	50 <sup>00</sup>
1/14/20	DeSeln, Lance	33 A S High St Melrose, MA	Video/Production	200 <sup>00</sup>
1/13/20	DeSeln, Lizbeth	33 A S High St Melrose MA	Web Service Reimbursement	168 <sup>74</sup>
1/15/20	DeSeln, Lizbeth	33A S. High St Melrose MA	Liability (low) Reimbursement	388 <sup>55</sup>
1/14/20	Joy Yoga	195 Green St Melrose, MA	Space use	50 <sup>00</sup>
1/13/20	Sam Sedwick	47 W. Wyman Ave Melrose, MA	Printing + copy Reimbursement	32 <sup>38</sup>
1/15/20	Staples	111 Middlesex Turnp Burlington, MA	Printing/mailling supplies	56 <sup>34</sup>

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

946<sup>01</sup>

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

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Enter on page 1, line 4 →

**Line 14: TOTAL EXPENDITURES IN THE PERIOD**

946<sup>01</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.

[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.