

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

of Massachusetts	File with: City or Town Clerk or Election Commission			
Fill in Reporting Period dates: Beginning Date: 1/1/	19 Ending Date: 10/28/19			
Type of Report: (Check one)				
Sth day preceding preliminary   Sth day preceding election   Sth 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	Shannon MacMaster			
Office Sought and District	Name of Committee Treasurer			
35 Brazil Street  Residential Address	35 Brazil Street  Committee Mailing Address			
E-mail: smacmaster2013@gmail.com	E-mail: skeenan76@me.com			
Phone # (optional):	Phone # (optional):			
SUMMARY BALANC	E INFORMATION:			
Line 1: Ending Balance from previous report	. 0			
Line 2: Total receipts this period (page 3, line 11)	5,180.00			
Line 3: Subtotal (line 1 plus line 2)	5,180.00			
Line 4: Total expenditures this period (page 5, lin	e 14) 4,908.12			
Line 5: Ending Balance (line 3 minus line 4)	271.88			
Line 6: Total in-kind contributions this period (pa	ge 6) 0			
Line 7: Total (all) outstanding liabilities (page 7)	2,500.00			
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:  Candidate with Committee  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: 10/28/19				
Signed under the penalties of perjury:	(Candidate's signature)			

#### **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 Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)	
7/19/19	Carl & Carla Abate 23 Sturges Rd., Reading, MA 01867	50.00		
7/23/19	Michael Benevento 133 Crow Ln., Newburyport, MA 01950	30.00		
7/19/19	Leo & Christina Boudreau 63 Windsor St., Melrose, MA	100.00		
7/18/19	John & Carol Brandano 180 Pleasant St., Melrose, MA 02176	50.00		
7/19/19	Barbara & Michael Buggy 131 Myrtle St., Melrose, MA	500.00	Foreman, MBTA	
7/19/19	Sean Casey PO Box 51515, Boston, MA 02205-1515	50.00		
7/19/19	Brian Cummings 22 Pleasant St., Meirose, MA	50.00		
7/25/19	Robert Cuomo 45 Castelmere Pl., North Andover, MA 01845	100.00		
7/19/19	Shannon & Jason Delgado 87 Mt. Vernon Ave., Melrose, MA 02176	100.00		
7/19/19	Spencer DeShields 22 Atlantic St., Lynn, MA	20.00		
7/19/19	David Deveney 165 Mystic Ave., Medford, MA 02155	50.00		
7/19/19	Bob & Jennifer Driscoll 33 Thurston Rd., Melrose, MA	50.00		
ine 9: Total Rece	ipts over \$50 (or listed above)	1,150	,	
ine 10: Total Rece	eipts \$50 and under* (not listed above)			
ine 11: TOTAL I	RECEIPTS IN THE PERIOD	1,150	← 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 (continued)

	Name and Residential Address Occupation & Employer					
Date Received	(alphabetical listing required) Amount		(for contributions of \$200 or more)			
7/19/19	Jack Eccles 99 Essex St., Unit 10, Melrose, MA 02176	50.00				
7/19/19	Jessica Farr 53 Argyle St., Melrose, MA 02176	20.00				
7/22/19	Bob & Jaime Fisher 17 LaValley Ln., Newburyport, MA 01950	75.00				
7/19/19	Alison Galino 61 Pine St., Woburn, MA	20.00				
7/19/19	Bart Galvin 4 Vinton St., Melrose, MA	100.00				
7/19/19	Theresa & Anthony Guardia 27 Davey Ln, Wakefield, MA 01880-5143	100.00				
7/19/19	Tracy & Joe Guarino 22 Clinton Rd., Melrose, MA	100.00				
7/19/19	Tom & Sheila Herbert 30 Brackenwood Dr., Nashua, NH 03062	50.00				
7/27/19	Marygail & Jerry Jaggers 8 Coolidge Dr., Tyngsboro, MA 01879	200.00	Retired			
7/19/19	Suzanne Kontz 80 Fiske St., Tewksbury, MA 01876-1116	100.00				
7/19/19	Mary Landergan 286 Porter St., Melrose, MA	50.00				
7/19/19	Megan Lee 34 Rock Glen Rd., Medford, MA	20.00				
7/19/19	Shane MacMaster 5 Blackrock Road, Melrose, MA	50.00				
Line 9: Total Receipts over \$50 (or listed above) 935.00		935.00				
Line 10: Total Rec	eipts \$50 and under* (not listed above)					
Line 11: TOTAL RECEIPTS IN THE PERIOD 2,085.00			← Enter on page 1, line 2			
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<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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	
5/17/19	Shawn MacMaster 35 Brazil Street, Melrose, MA 02176	500.00	Director of Strategic Development and Project Planning, Middlesex Sheriff's Department	
6/25/19	Shawn MacMaster 35 Brazil Street, Melrose, MA 02176 2,000.00		Director of Strategic Development and Project Planning, Middlesex Sheriff's Department	
7/19/19	Steve Murphy Nashua, NH	20.00		
7/18/19	Susan Orenberger 16 John McQuinn Cir., Framingham, MA 01701	50.00		
7/19/19	Malav Patel 8 Henry St., #2, Medford, MA	100.00		
7/19/19	Gayle Peterson 20 Sargent St., Melrose, MA	25.00		
7/19/19	Karen Walson 71 Fellsway East, Melrose, MA	250.00	interior designer, Classic Kitchen & Bath Showroom	
7/30/19	Mike Zwirko 100 Derby Road, Melrose, MA	150.00		
ine 9: Total Receipts over \$50 (or listed above) 3,095				
ine 10: Total Rece	ipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD 5,180			← 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 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
6/14/19	Cambridge Reprographics	21 McGrath Hwy Somerville, MA 02143	Campaign Kickoff Invitation	59.22
6/24/19	Cambridge Reprographics	21 McGrath Hwy Somerville, MA 02143	Campaign Kickoff Invitation Reorder	44.48
10/28/19	Connolly Printing	17B Gill St Woburn, MA 01801	Campaign mailing	907.99
7/23/19	Diane MacDonald	17 Birch Hill Rd Melrose, MA	Catering for Kickoff event	350.00
7/2/19	DJ Rolling Rick	80 Boston Road, #1123 Groton, MA 01450	DJ for kickoff event	300.00
7/26/19	Eastern Bank	441 Main Street Melrose, MA	Banking fees	52.00
10/1/19	ED Photography	41 Norman Road Melrose, MA	Photos for literature	112.50
10/28/19	ED Photography	41 Norman Road Melrose, MA	Photos for literature	112.50
8/17/19	Lowe's	15 Commerce Way Woburn, MA	Lumber for signs	23.52
7/19/19	Lt. Norman Prince VFW Post #1506	428 Main St. Melrose, MA	Hall rental for kickoff party	100.00
9/28/19	Melrose, City of	562 Main St. Melrose, MA	Melrose Veterans Open Golf Tournament	250.00
10/15/19	Minuteman Press	988 Eastern Ave. Malden, MA 02148	Printing of palm cards	214.49
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	2,526.70
Line 13: Total Expenditures \$50 and under* (not listed above)				
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	2,526.70

<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
10/15/19	Spartan Paint & Supplies	444 Main Street Stoneham, MA 02180	Campaign supplies	40.75
6/17/19	Staples	335 Washington Street Woburn, MA 01801	Campaign supplies	48.27
6/26/19	Sterling Printing	214 Main Street Stoneham, MA 02180	Deposit for bumper stickers, lapel stickers, foldover signs, yard signs, sign frames and	750.00
7/15/19	Sterling Printing	214 Main Street Stoneham, MA 02180	Balance for bumper stickers, lapel stickers, foldover signs, yard signs, sign frames and	890.00
8/13/19	Sterling Printing	214 Main Street Stoneham, MA 02180	Sales tax for bumper stickers, lapel stickers, foldover signs, yard signs, sign frames and	102.50
10/16/19	Sterling Printing	214 Main Street Stoneham, MA 02180	Yard signs and sign frames	425.00
10/15/19	USPS	Medford, MA	Stamps and first class mail	56.15
6/17/19	USPS	Melrose, MA	Stamps	68.75
		Line 12: Expenditures over \$5	0 (or listed above)	2,381.42
		Line 13: Expenditures \$50 and	under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	4,908.12

<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
		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 CO	ONTRIBUTIONS	0

<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.

# **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
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				2,500.00

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