Form CPF M 102: Campaign Finance Report **Municipal Form**

Office of Campaign and Political Finance

Commonwealth

CITY CLERK MELROSE-MA 2023 JAN 5 PM2:21

of Massachusetts

File with:

City or Town Clerk or Election Commission

Reporting Period Beginning	1/1/2022	Ending:	12/31/2022	
Type of report: Year-end				
Mary Beth McA	teer-Margolis	***************************************	Committee to E	lect McAteer-Margolis
Full Name of Candidate			Committee Name	
Alderman a	Alderman at Large Kathleen McCarron		een McCarron	
Office Sought/ District Name of Committee Treasurer		Committee Treasurer		
22 Stowecroft Road, N	22 Stowecroft Road, Melrose, MA 02176		24 Elmcrest Circle, Melrose, MA 02176	
Residential Address			Committee Mailing Address	
	SUMMARY	BALANCE	INFORMATION	Y
Line 1: End	ling balance fron	ı previous repoi	t:	\$507.38
Line 2: Tota	al receipts this pe	eriod (Schedule	A)	\$0.00
	total (line 1 plus	•		\$507.38
Line 4: Tota	al expenditures t	his period (Sche	dule B)	\$0.00
Line 5: End	ing balance (line	3 minus line 4)		\$507.38
Line 6: Tota	l in-kind contribu	tions this period	(Schedule C)	\$0.00
Line 7: Total (all) outstanding liabilities (Schedule D)		dule D)	\$0.00	
Line 8: Nam	e of bank(s) used	<u>Eastern</u>	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 and 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: 1/2/2023				
Treasurer's signature (in ink)				
Affidavit of Candidate (check 1 box only) Candidate with Committee an no activity independent of the committee. I certify that have examined this report, and 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.				
Candidate without committee OR Candidate with independent activity filing separate report. I certify that I have examined this report, and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign ance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents athe 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. (Candidate's signature (in ink)	WAter	signed upder the penal	ies of perjury:	1/4/2023 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.

Date	Name and Residential Address	Amount	Occupation and Employer
		\$0.00	
Line 9: Tota	I Receipts in excess of \$50 or listed above	\$0.00	
Line 10: Tot	al Receipts \$50 and under	\$0.00	
Line 11: Tot	al Receipts in the period	\$0.00	

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 over \$50 and under may be added together from committee records, and reported on line 13.

Date Name and Residential Address	Amount	Purpose
	\$0.00	
line 40. Europeliteur von App	* 0.00	
Line 12: Expenditures over \$50	\$0.00	
Line 13: Expenditures \$50 and under	\$0.00	
Line 14: Total Expenditures in the period	\$0.00	

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. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description/ Occupation and Employer
		\$0.00	
Lir	ne 15: Total in-kind listed above	\$0.00	
Lir	ne 16: Total in-kind not listed above	\$0.00	
Lie	ne 17: Total in-kind in the period	\$0.00	

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 the liabilities incurred during this reporting period.

Date Incurred To Whom Due	Amount	Purpose
	\$0.00	
Line 18: Outstanding liabilites (ALL)	\$0.00	