



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

File with:
City or Town Clerk or Election Commission

2007 SEP 10 P 12:30

Please print or type all information, except signatures.

Fill in dates: Reporting Period Beginning 7 20 07 Ending 8 31 07

Type of report: (Check one)
 8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

NEAL ANDERSON
Full Name of Candidate (if applicable)
Councillor WARD 7
Office Sought and District
56 MILLS ST
Residential Address
MALDEN, MA 02148
Tel. No. (optional)

Committee to elect NEAL ANDERSON
Committee Name
PAULA M ANDERSON
Name of Committee Treasurer
56 MILLS ST
Committee Mailing Address
MALDEN, MA 02148
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>0</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>4228</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>4228</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>3189</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>1039</u>

Line 6: Total in-kind contributions this period (page 4)	\$ <u>400</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>0</u>
Line 8: Name of bank(s) used	<u>CENTURY BANK</u>

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:
Paula Anderson
Treasurer's signature (in ink) 9-8-07
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)
 Candidate with Committee and no activity independent of the 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.
 Candidate without Committee OR Candidate with independent activity filing separate report
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 committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:
Neal Anderson
Candidate signature (in ink) 9/8/07
Date

SCHEDULE A: RECEIPTS

V.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.

This page may be copied 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)
8/8/07	ANDERSON, BERTHA 113 MILLS ST - MALDEN	100 ⁰⁰	
8/8/07	ANDERSON, Richard 111 MILLS ST, MALDEN	100	
8/8/07	BRENNAN, JOHN 88 Beltran ST, MALDEN	100	
8/13/07	CHISHOLM, BETTE 13130 LARK ABBEY, SAN ANTONIO, TX	100	
8/8/07	DESMOND, KENNEDY/MARION 60 LORENA RD Winchester	100	
8/8/07	FERRERA, JOAO 61 MILLS ST, MALDEN	150	
8/8/07	GREER, LYNN & ALMA 1718 SANDY HILL RD, DRYMONT, PA	1,000	RETIRED \$500 each
8/20/07	FRANCIS, JEFFREY & KAREN 113 Baylston ST MALDEN	100	
8/8/07	LEWIS, William CAROL 26 LINWOOD ST, MALDEN	100	
8/8/07	MZADOUAKK, SIMONA CARMEN 61 MILLS ST MALDEN	200	
8/8/07	PROUT, MITZI 124 MILLERD, HAMPTON, NH	100	
8/13/07	SMITH, ARTHUR 34 W. SELDEN ST MATAPAN	100	
8/26/07	SULLIVAN, MICHAEL & MARCIA 1304 SALEM ST, MALDEN	100	
8/9/07	VIEIRA, GILSON ROGERICA 53 MILLS ST, MALDEN	100	
8/30/07	WARD, WALLACE 34 BROAD ST LYNN	150	
Line 9: Total receipts in excess of \$50 (or listed above)		→	
Line 10: Total receipts \$50 and under* (not listed above)		→	
Line 11: TOTAL RECEIPTS IN THE PERIOD		→	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.

Continued

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.

This page may be copied 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)
8/8/07	Weinberg, Robert 11 E. SEABREEZE LN, Nahant	100	
8/8/07	Weiner, LAWRENCE SUSAN 21 HILL ST, MALDEN	100	
Line 9: Total receipts in excess of \$50 (or listed above)		2800 00	
Line 10: Total receipts \$50 and under* (not listed above)		1428 00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		4228 00	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 B: EXPENDITURES

1.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.

This page may be copied 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
8/1/07	ART-TONE STUDIOS	623 BEACH ST REVERE	PRINTING	326
8/10/07	COMM PRINTING SERVICE	6 MEDFORD ST CHARLESTOWN	PRINTING	475
8/24/07	COSTCO	2 MYSTIC VIEW EVERETT	COOKOUT	176
8/28/07	COSTCO	2 MYSTIC VIEW EVERETT	COOKOUT	163
8/30/07	COSTCO	2 MYSTIC VIEW EVERETT	COOKOUT	155
8/7/07	CROSS & OBERHE	916 BYRD AVE NEENAH, WI	PRINTING	841
8/20/07	HOME DEPOT	1 MYSTIC VIEW EVERETT	SUPPLIES	106
8/17/07	SIGNS 2 GO	BROADWAY EVERETT	PRINTING	630
8/24/07	STOP & SHOP	99 CHARLES ST MALDEN	SENIOR PARTY	122
Line 12: Expenditures over \$50				2994
Line 13: Expenditures \$50 and under*				195
Line 14: TOTAL EXPENDITURES				3189

Enter on page 1, line 4

*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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
8/17/07	LAWRENCE VOZELLA	13 HOLYOKE ST MALDEN	TRUCKING ADVERTISEMENT	400
Line 15: In-kind over \$50				400
Line 16: In-kind \$50 and under				—
Line 17: Total In-kind				400

Enter on page 1, line 6

* 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
Line 18: OUTSTANDING LIABILITIES (ALL)				—

Enter on page 1, line 7