



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report

## Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date:  Ending Date:

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

Candidate Full Name (if applicable)

Office Sought and District

Residential Address

Telephone Number (optional):

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<input type="text" value="0"/>
Line 2: Total receipts this period (page 3, line 11)	<input type="text" value="2069.89"/>
Line 3: Subtotal (line 1 plus line 2)	<input type="text" value="2069.89"/>
Line 4: Total expenditures this period (page 5, line 14)	<input type="text" value="1565.78"/>
Line 5: Ending Balance (line 3 minus line 4)	<input type="text" value="\$504.11"/>
Line 6: Total in-kind contributions this period (page 6)	<input type="text"/>
Line 7: Total (all) outstanding liabilities (page 7)	<input type="text"/>
Line 8: Name of bank(s) used:	<input type="text" value="TD Bank Metro Credit Union Malden"/>

**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:

**FOR CANDIDATE FILINGS ONLY: 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:  (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)
8/21/2019	Joyce Stanley Armstrong Brook, MD	\$180	
8/17/2019	Geraldine Calkens	\$50	
9/11/2019	Joseph Carabatta, Sr	\$470	owner/principal Carabatta Management Company
8/31/2019	Krystal Owens, Coles	\$50	
8/24/2019	Kimberly Denise	\$50	
8/24/2019	Michelle Carrick Frank	\$20	
8/24/2019	Tina Greenwood	\$25	
8/20/2019	Dominique Hardman	\$20	
8/18/2019	Eric Henry	\$250	75 Wiley St - Sr. operations mgr. Malden 02148 ever source
8/17/2019	Karen Colon Hayes	\$35	
8/24/2019	Nura Hunter	\$25	
8/17/2019	Jill Barnett Kaufman	\$25	
Line 9: Total Receipts over \$50 (or listed above)		<del>\$970</del>	1100.00
Line 10: Total Receipts \$50 and under* (not listed above)		<del>\$130</del>	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		<b>1100</b>	← 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 A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8/17/2019	Erwin Kaufman	\$20	
8/28/2019	Tarel King 35 Garland, Everett	\$25	
8/28/2019	Alice Lloyd 24 Kress Ave. New Rochelle, NY	\$20	
8/20/2019	Kenya Lloyd 245 Hugonot St. New Rochelle, NY	\$50	
8/13/2019	Dawn Macklin 36 Dartmouth St. Malden	\$101.09	Catabetta Mgmt Agency
8/24/2019	Brigitte McLeod	\$50	
8/25/2019	Anna Maria Musumeci	\$50	
8/22/2019	Rachael Running	\$25	
8/23/2019	Kim Schofield	\$25	
8/18/2019	Maurice Simmons	\$25	
8/22/2019	Egle Maria Sord	\$20	
8/22/2019	Eden Garhart Smith	\$50	
8/20/2019	Erica Stewart 405 Broadwing Way Apex, NC	\$100	
Line 9: Total Receipts over \$50 (or listed above)		<del>401.09</del> 644.89	
Line 10: Total Receipts \$50 and under* (not listed above)		<del>160.00</del>	
Line 11: TOTAL RECEIPTS IN THE PERIOD		644.89	← 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 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)
8/31/2014	Tammie Taylor	\$30	
8/17/2014	Gladys Thomas 36 Dartmouth St. Malden	\$50	
8/17/2014	Wendy Ginsburg Witt	\$50	
8/31/2014	Larry Yizar	\$175	
8/27/2014	Hope Linial	\$20	

Line 9: Total Receipts over \$50 (or listed above)	<del>275</del> 325	
Line 10: Total Receipts \$50 and under* (not listed above)	<del>30</del>	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>	<del>275</del> 325	← 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.

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## 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
	Joseph Carabetta, Sr		check deposit \$470	470
	Eric Henry		\$250 donation	250
Line 15: In-Kind Contributions over \$50 (or listed above)				720
Line 16: In-Kind Contributions \$50 & under (not listed above)				—
Enter on page 1, line 6 → <b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>				720

\* 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 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
10/15/2014	3 amigos	375 Main St. Malden MA 02148	Meet & greet	529.35
9/17/2014	Signs on the Cheap	11525a Jonestown Austin, TX 78750	Backyard signs	175.09
9/10/2014	U Printing	8000 Hasick Ave Van Nuys, CA 91412	Banners, Posters Palm Cards	558.12
10/21/2014	Uprinting	8000 Hasick Ave Van Nuys, CA 91412	Palm Cards	118.33
8/13/2014	Nota Printing	275 Wyman St. Waltham, MA 02451	Shirts, hats door hangers	184.89
Line 12: Total Expenditures over \$50 (or listed above)				1565.78
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				

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.