



Commonwealth of Massachusetts

RECEIVED Form OPF M 102: Campaign Finance Report Municipal Form

2020 JAN 21 P 6:46

Office of Campaign and Political Finance

CITY CLERK'S OFFICE
MALDEN, MASS.

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10-19-19 Ending Date: 12-31-19

Type of Report: (Check one)

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

Michelle A. Luong
Candidate Full Name (if applicable)

Malden School Committee Ward 7
Office Sought and District

111 Daniels Street Malden Ma 02148
Residential Address

E-mail: electmichelleluong@gmail.com

Phone # (optional): 617-620-7754

Committee to Elect Michelle Luong
Committee Name

Minh T. Luong
Name of Committee Treasurer

111 Daniels Street Malden Ma 02148
Committee Mailing Address

E-mail: electmichelleluong@gmail.com

Phone # (optional): 781-789-3388

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>2520.35</u>
Line 2: Total receipts this period (page 3, line 11)	<u>875.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>3395.35</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>1490.80</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>1904.55</u>
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	<u>3126.85</u>
Line 8: Name of bank(s) used:	<u>Eastern 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: [Signature] (Treasurer's signature) Date: 1-21-2020

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: [Signature] (Candidate's signature) Date: 1-21-2020

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)
10-20-19	Louis A. Mandarini 35 Highland Ave. Malden, MA 02148	300.00 ck	Labors Local 22 Business manager.
10-20-19	Marie Alsterberg 8 Fenwick Ave Malden, MA 02148	25.00 ck	
10-20-19	Jason Laue 235 Riverside Ave #2 Malden, MA 02155	50.00 Cash	
10-20-19	Gail Ruffo 97 Lyme Street Malden, MA 02148	25.00 ck	
10-20-19	Diana Bucci 121 Daniels St. Malden MA 02148	25.00 Cash	
10-20-19	Edwin Lucey 116 Daniels St. Malden MA 02148	100.00 ck	
10-20-19	Deborah + Albert DeManna 144 Maple St. Malden, MA 02148	100.00 ck	
10-20-19	Cherly McMahon 80 Park Street Pepperell, MA 01463	50.00 ck.	
10-20-19	Arnan Taylor 57 Mount Vernon St Apt 1 Malden MA 02148	40.00 ck.	
10-20-19	Dan Ruffo 123 Daniels St. Malden, MA 02148	60.00 Cash	
10-20-19	Sue Thomson 440 Ferry St Apt 2 Malden MA 02148	50.00 ck	
10-20-19	Att: Kenny N. Mazanson. 306 Bryant St. Apt 4 Malden, MA 02148	50.00 ck.	
Line 9: Total Receipts over \$50 (or listed above)		560.00	
Line 10: Total Receipts \$50 and under* (not listed above)		275.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		835.00	← 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.

