

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: 1/1/20 Ending Date: 12/31/20
Type of Report: (Check one) Sth day preceding preliminary Sth day preceding election 30 day after election year-end report dissolution
PAUL ALAW CONSIDA Candidate Full Name (if applicable) COUNCILLOR Ward 2 Office Sought and District Committee To Elect Paul A Condon Committee Name Committee Name Committee Name Committee To Elect Paul A Condon Committee Name Committee Treasurer
50 Gale St Malden 02140 D2 Gale St Malden 02140 Residential Address Committee Mailing Address
E-mail: P Condon City of Malden DRG E-mail:
Phone # (optional): 781870 0098 Phone # (optional):
SUMMARY BALANCE INFORMATION:
Line 1: Ending Balance from previous report
Line 2: Total receipts this period (page 3, line 11)
Line 3: Subtotal (line 1 plus line 2)
Line 4: Total expenditures this period (page 5, line 14)
Line 5: Ending Balance (line 3 minus line 4)
Line 6: Total in-kind contributions this period (page 6)
Line 7: Total (all) outstanding liabilities (page 7)
Line 8: Name of bank(s) used: People United
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: Date: 4/26/2/
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.
Stand and the population of portugue Park 1 Complete Signature) Date: 4/24/2/

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8/19/20	123 Oakhand	100	
11/20/20	N.E. Laloner District		
	7 Laborer Way Hopkinton Ma 01748	500	
	·		
Control of the Contro		American State Control of the Contro	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD	(400	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

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.)

eport 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			
1							
			T				
		Line 12: Total Expenditures over					
	:						
		Line 13: Total Expenditures \$50	100,00				
•		T (A. TROTELLE ENVIRONMENTE					
Enter on page 1, line 4 Line 14: TOTAL EXPENDITURES IN THE PERIOD [

^{*} 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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