



Commonwealth  
of Massachusetts

**Form CPF M 102: Campaign Finance Report**  
**Office of Campaign and Political Finance**

File with: Director  
Office of Campaign and Political Finance  
One Ashburton Place Rm. 411  
Boston, MA 02108  
(617) 979-8300

CPF ID# 16834

RECEIVED

Reporting Period: Beginning: 9/3/2017 Ending: 12/31/2017

2018 JAN 22 P 12:31

Type of Report: 2017 Year-end report (MUN)

CITY CLERK'S OFFICE  
MALDEN, MASS.

McClain, Jennifer  
Full Name of Candidate  
Municipal, Local Filer  
Office Sought/ District  
65 Bower Street  
Malden, MA 02148  
Residential Address

McClain Committee  
Committee Name  
Jorge Tierno  
Name of Committee Treasurer  
65 Bower Street  
Malden, MA 02148  
Committee Address

**SUMMARY BALANCE INFORMATION**

Ending balance from previous report:	\$0.00
Total receipts this period:	\$50.00
Subtotal:	\$50.00
Total expenditures this period:	\$0.00
Ending Balance:	\$50.00
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Total inkind contributions this period:	\$21.00
Total outstanding liabilities:	\$50.00
Name of Bank Used:	Eastern 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, receipts, expenditures, disbursements, inkind 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:

1/22/2018

Treasurer's signature (in ink)

Date

**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, 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 finance activity including contributions, loans, receipts, expenditures, disbursements, inkind 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:

1/22/18

Candidate's signature (in ink)

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.*

<u>Date</u>	<u>Name and Residential Address</u>	<u>Amount</u>	<u>Occupation and Employer</u>
9/5/2017	McClain, Jennifer 65 Bower Street Malden, MA 02148	\$50.00	
<b>Total Itemized Receipts:</b>		<b>\$50.00</b>	
<b>Total Unitemized Receipts:</b>		<b>\$0.00</b>	
<b>Total Receipts:</b>		<b><u>\$50.00</u></b>	

## Schedule C: "Inkind" Contributions

*Please itemize contributors who have made inkind 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.*

<u>Date</u>	<u>Name and Residential Address</u>	<u>Value</u>	<u>Description, Occupation &amp; Employer</u>
10/12/2017	Mass Alliance 15 Court Square, Suite 650 Boston, MA 02108	\$21.00	Staff Hours
<b>Total Itemized In-kind Contributions:</b>		<b>\$21.00</b>	
<b>Total Unitemized In-kind Contributions:</b>		<b>\$0.00</b>	
<b>Total In-kind Contributions:</b>		<b>\$21.00</b>	

## Schedule D: Liabilities

*H.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.*

<u>Date</u>	<u>To Whom Due</u>	<u>Amount</u>	<u>Purpose</u>
9/5/2017	McClain, Jennifer 65 Bower Street Malden MA, 02148	\$50.00	Candidate Loan
	<b>Total Liabilities:</b>	<b><u>\$50.00</u></b>	