



Commonwealth
of Massachusetts

CITY OF WALTHAM
CITY CLERK'S OFFICE

2021 JAN 19 P 3:45

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: 1/1/2020 Ending Date: 12/31/20

Type of Report: (Check one)

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

Patrick J. O'Brien
Candidate Full Name (if applicable)
Councillor-at-Large
Office Sought and District
95 Wetherbee Road Waltham MA 02453
Residential Address
E-mail: patrick024@gmail.com
Phone # (optional): 781-891-5239

Pat O'Brien Committee
Committee Name
Eugene F. O'Brien
Name of Committee Treasurer
95 Ravenswood Road 02453
Committee Mailing Address
E-mail: patrick024@gmail.com
Phone # (optional): 781-899-3543

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report 2673.85
Line 2: Total receipts this period (page 3, line 11) 0
Line 3: Subtotal (line 1 plus line 2) 2673.85
Line 4: Total expenditures this period (page 5, line 14) 1305.14
Line 5: Ending Balance (line 3 minus line 4) 1368.71
Line 6: Total in-kind contributions this period (page 6) 0
Line 7: Total (all) outstanding liabilities (page 7) 0
Line 8: Name of bank(s) used: Rockland 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, 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: Eugene O'Brien Sr. (Treasurer's signature) Date: Jan 16, 2021

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: Patrick J. O'Brien (Candidate's signature)

Date: 1/16/21

SCHEDULE A: RECEIPTS (continued)[illegible]

* 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 (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
5/1/20	JESSICA ABULLAR	103 WARREN ST WALTHAM 02453	SERGIO MEM. ABULLAR FUND	50.00
11/27/20	BELMONT PRINTING	46 BRIGITON ST BELMONT, MA 02478	FLYERS	422.85
8/3/20	BELMONT PRINTING	"	STATIONARY	466.04
1/13/20	DRASCO FLORES	599 H 64 ST WALTHAM MA 02453	FUNERAL FLOWERS	116.25
1/22/20	CINEVISION JIM SIMEONE	58 MT WALLEY RD, WALTHAM MA 02451	CAMPAIGN VIDEO	75.00
7/6/20	MILITARY FRIENDS FOUNDATION	185 HAMMOND ST WALTHAM MA 02451	DONATION	25.00
5/6/20	SITOPPRETS	731 MOODY ST WALTHAM 02453	GIFT CARD	50.00
10/14/20	PIZZI FAIRM	485 LINCOLN ST Waltham 02451	ICE CREAM CONTEST	\$100
			FOR ICIDS	
Line 12: Expenditures over \$50 (or listed above)			\$1180.14	
Line 13: Expenditures \$50 and under* (not listed above)			\$125.00	
Line 14: TOTAL EXPENDITURES IN THE PERIOD			\$1305.14	

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 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
Enter on page 1, line 7 →		Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)		

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)

Line 9: Total Receipts over \$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.

(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.)

* 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 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value

Line 15: In-Kind Contributions over \$50 (or listed above)

Line 16: In-Kind Contributions \$50 & under (not listed above)

Enter on page 1, line 6 →

Line 17: TOTAL IN-KIND CONTRIBUTIONS

* 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.

