

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance CITY CLERK'S OFFICE

of Massachusetts	2017 OCT 25 P 4: 16 File with: City of Town Clerk of Election Commission				
Fill in Reporting Period dates: Beginning Date: 1/1/	1/2017 Ending Date: RECURDED				
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	30 day after election year-end report dissolution				
John McLaughlin Candidate Full Name (if applicable) Waltham City Councillor Ward 4 Office Sought and District 42 Beal Road, Waltham, MA 02453 Residential Address E-mail: Phone # (optional):	John McLaughlin Committee Committee Name Jeanne M Flaherty Name of Committee Treasurer 85 Lafayette St, Waltham, MA 02453 Committee Mailing Address E-mail: Phone # (optional):				
SUMMARV RALAN	NCE INFORMATION:				
Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11	\$990.66				
Line 3: Subtotal (line 1 plus line 2)	\$5,375.66				
Line 4: Total expenditures this period (page 5, li	line 14) \$(2,834.50)				
Line 5: Ending Balance (line 3 minus line 4)	\$2,541.16				
Line 6: Total in-kind contributions this period (p	(page 6) 0				
Line 7: Total (all) outstanding liabilities (page 7)					
Line 8: Name of bank(s) used: Watertown Savings	32 Dalik				
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: 10/26/17					
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: 10/26/17					

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)
9/8/17	Sheila Atkins 92 Blomerth St Malden, MA 02452	\$100.00	
9/16/17	Wayne Brasco 773 Moody St Waltham, MA 02453	\$100.00	
9/8/17	Joseph Burgoyne 144 Kingston Rd Waltham, MA 02451	\$100.00	
9/8/17	Patricia Callaghan 24 Westfield Rd Newton, MA 02465	\$100.00	
9/8/17	C.M. Campbell 58 Aldie St Allston, MA 02134	\$100.00	
9/8/17	Joseph Connors 142 Chaffee Ave Waltham, MA 02453	\$100.00	
9/8/17	Michael Dallaire 162 Harrington Rd Waltham, MA 02452	\$100.00	
9/8/17	Joseph Goode 8 Clements Rd Waltham, MA 02453	\$100.00	
9/16/17	Susan Grimes 7 Clark Rd Milton, MA 02186	\$100.00	
9/8/17	Patricia Hill 18 Sleigh Rd Chelmsford, MA 01824	\$100.00	
9/8/17	Mitchell Kijanka 18 Woodhead Rd Chelmsford, MA 01824	\$100.00	
9/16/17	Daniel LeBlanc 36 Juniper Hill Rd Waltham, MA 02452	\$100.00	
Line 9: Total Receipts over \$50 (or listed above) Cont on pg 2			
Line 10: Total Rece	Line 10: Total Receipts \$50 and under* (not listed above)		
Line 11: TOTAL RECEIPTS IN THE PERIOD See Page 2			← 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)
7/29/17	MA & No New Engl Laborer's District Council 7 Laborer's Way Hopkington, MA 01748	\$500.00	
9/16/17	Gary Marchese 85 River St Waltham, MA 02453	\$75.00	
9/8/17	Jeanette McCarthy 91 Hamilton Rd Waltham, MA 02453	\$60.00	
9/8/17	Jeanne McDonald 53 Lafayette St Waltham, MA 02453	\$100.00	
9/8/17	Daniel McLaughlin 62 Falkland St Brighton, MA 02135	\$100.00	
9/8/17	Mary Ann McLaughlin 69 Perthshire St Brighton, MA 02135	\$250.00	Retired
9/8/17	Thomas McLaughlin 69 Perthshire St Brighton, MA 02135	\$250.00	Retired
9/8/17	Thomas McLaughlin 66 Kemper St Quincy, MA 02170	\$100.00	
9/8/17	John Mullaney 100 Grandview Rd Braintree, MA 02184	\$100.00	
9/8/17	NAGE 159 Burgin Pkwy Quincy, MA 02169	\$100.00	
9/16/17	Charles Vanderbossche 126 Virginia Rd Waltham, MA 02453	\$100.00	
Line 9: Total Rece	ipts over \$50 (or listed above)	\$2935.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$1450.00	,
	RECEIPTS IN THE PERIOD	\$4385.00	Enter on page 1, line 2 d include only those receipts not itemized above.

^{*} 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.)

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	
1/11/17	Catholic Memorial	235 Baker Street West Roxbury, MA 02132	Advertising	\$100.00	
5/8/17	Warrendale Little League	124 Beal Road Waltham, MA 02453	Team Sponsorship	\$425.00	
10/15/17	Friends of Saint Jude	175 Main Street Waltham, MA 02453	Advertising	\$100.00	
10/15/17	Friends of Saint Jude	175 Main Street Waltham, MA 02453	Road Race Sponsorship	\$100.00	
10/15/17	Friends of Saint Jude	175 Main Street Waltham, MA 02453	Advertising	\$175.00	
10/20/17	Barbara McLaughlin	42 Beal Road Waltham, MA 02453	Reimburse mailing expenses	\$631.45	
10/20/17	Barbara McLaughlin	42 Beal Road Waltham, MA 02453	Reimburse City Streets fundraiser expenses	\$1053.05	
10/20/17	Barbara McLaughlin	42 Beal Road Waltham, MA 02453	Reimburse Warrendale Little League AED donation	\$250.00	
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	\$2,834.50	
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	0	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD \$2				\$2,834.50	

^{*} 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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SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	(u.p.iii. editori in ening)			
				L
		Line 12: Expenditures over \$50) (or listed above)	
Line 13: Expenditures \$50 and under* (not listed above)				
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				

^{*} 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 16 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.

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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 OUTSTANI	DING LIABILITIES (ALL)	