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Commonwealth  
of Massachusetts

## Form CPF M 102: Campaign Finance Report

### Municipal Form

Office of Campaign and Political Finance

CITY OF WALTHAM  
CITY CLERK'S OFFICE

2015 JAN 15 A 11:18

RECORDED

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning Month 1 Date 1 Year 14 Ending Month 12 Date 31 Year 2014

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

Full Name of Candidate (if applicable)

Councillor-at-Large

Office Sought and District

95 Wetherbee Road

Residential Address

Waltham, MA 02453

781-891-5279

Tel. No. (optional)

Patrick O'Brien Committee

Committee Name

Eugene F. O'Brien

Name of Committee Treasurer

95 Ravenwood Road

Committee Mailing Address

Waltham MA 02453

781-899-3543

Tel. No. (optional)

### SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 620

Line 2: Total receipts this period (page 2, line 11) \$ 3032.28

Line 3: Subtotal (line 1 plus line 2) \$ 3652.28

Line 4: Total expenditures this period (page 3, line 14) \$ 2268.37

Line 5: Ending balance (line 3 minus line 4) \$ 1383.91

Line 6: Total in-kind contributions this period (page 4) \$ 0

Line 7: Total (all) outstanding liabilities (page 4) \$ 3889

Line 8: Name of bank(s) used Rockland Trust

### 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 (in ink)

1/15/15

Date

### FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

### 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:

[Signature]

Candidate signature (in ink)

1-14-2015

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.

This page may be copied 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)
	Leo Chiasson 62 Morris St - 02453	25 00	
	Kathleen Cox 70 Albemarle Rd Waltham 02452	20 00	
	William Durkee 96 Glen St 02451	25 00	
	Robert Eagle 59 Wetherbee Rd 02453	50 00	
	RA Gallagher 83 Cedarwood Ave 02453	50 00	
2/4/14	Patrick J. O'Brien 95 Wetherbee Rd - Waltham 02453	1396 14	Director of Employer/ Broker Relations Minuteman Health 179 Lincoln St Boston, MA 02111
	Loan to Committee		
4/8/14	Patrick J. O'Brien 95 Wetherbee Rd - Waltham 02453	1396 14	
	Loan to Committee		
7/15/14	Tim Murphy Waltham 02452	20 00	
7/15/14	Carol Portenlose Waltham 02452	50 00	
Line 9: Total receipts in excess of \$50 (or listed above)		2792 28	
Line 10: Total receipts \$50 and under* (not listed above)		240 00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		3032 28	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.*

This page may be copied if additional pages are required to 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	
5/1/14	Embroid Me	1091 Lexington St - Wat 02452	Shirts	291	04
5/1/14	Embroid Me	1091 Lexington St - Wat 02452	150 footballs	419	69
5/1/14	Indie Owned LLC	258 Harvard St Brookline MA	Chamber Restaurant Guide	595	00
1-8-2014	Wayne T. McCaffrey	28 Ellison Park Waltham MA 02452	10,000 Telephone Cards	762	64
2-7-2014	"	"	mailing labels	200	00
Line 12: Expenditures over \$50				2268	37
Line 13: Expenditures \$50 and under*				0	
Line 14: TOTAL EXPENDITURES				2268	37

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 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	0
			Line 16: In-kind \$50 and under	0
			Line 17: Total In-kind	0

\* 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.

## 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: OUTSTANDING LIABILITIES (ALL)	3889

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.



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report