



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF BEVERLY
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2019 OCT 28 A 8:31

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 11/1/19 Ending Date: 10/28/19

Type of Report: (Check one)

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

Donald G. Martin
Candidate Full Name (if applicable)
Ward 5 Councilor
Office Sought and District
27 Berrywood Lane Beverly, MA 01915
Residential Address
E-mail: councilormartin@gmail.com
Phone # (optional): _____

Donald G. Martin Committee
Committee Name
Michelle L. Martin
Name of Committee Treasurer
27 Berrywood Lane, Beverly, MA 01915
Committee Mailing Address
E-mail: _____
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

| | |
|--|-----------------|
| Line 1: Ending Balance from previous report | <u>328.71</u> |
| Line 2: Total receipts this period (page 3, line 11) | <u>4,825.00</u> |
| Line 3: Subtotal (line 1 plus line 2) | <u>5,153.71</u> |
| Line 4: Total expenditures this period (page 5, line 14) | <u>5,044.25</u> |
| Line 5: Ending Balance (line 3 minus line 4) | <u>109.46</u> |
| Line 6: Total in-kind contributions this period (page 6) | <u>- 0 -</u> |
| Line 7: Total (all) outstanding liabilities (page 7) | <u>- 0 -</u> |
| Line 8: Name of bank(s) used: | <u>TD Bank</u> |

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: Michelle L. Martin (Treasurer's signature) Date: 10/27/19

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.

Signed under the penalties of perjury: Donald G. Martin (Candidate's signature) Date: 10/27/19

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) |
|--|---|--------|---|
| 9/15/19 | James Prallon 9 Birchhead Ave. Beverly, MA 01915 | 75 | |
| 4/22/19 | Arthur Booras 9 Walden St Beverly, MA 01915 | 100 | |
| 7/1/19 | Andrew Filbrici 26 Berywood Lane Beverly, MA 01915 | 200 | retired |
| 8/17/19 | Thomas Gaudet 7 Joyce Rd. Peabody, MA 01960 | 100 | |
| 9/15/19 | Bradford Hill 16 Birch Lane Ipswich, MA 01938 | 100 | |
| 5/11/19 | Harland Jones 24 Lee St, P-6 Marblehead, MA 01945 | 100 | |
| 10/2/19 | The Jones Committee 249 Park St. North Reading, MA 01864 | 100 | |
| 7/11/19 | Andrew Kundrot 28 Berywood Lane Beverly, MA 01915 | 200 | retired |
| 7/28/19 | James Luvasseur 27 Pershing Ave. Beverly, MA 01915 | 100 | |
| 5/4/19 | Arija Lucci 130 Colm St. Beverly, MA 01915 | 100 | |
| 5/4/19 | Patrick Lucci 130 Colm St. Beverly, MA 01915 | 100 | |
| 3/19/19 | Donald G. Maybin 27 Berywood Lane Beverly, MA 01915 | 100 | |
| 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.

SCHEDULE A: RECEIPTS (continued)

| Date Received | Name and Residential Address (alphabetical listing required) | Amount | Occupation & Employer (for contributions of \$200 or more) |
|--|---|--------|---|
| 6/29/19 | Jessica Martin 27 Berrywood Lane Beverly, MA 01915 | 200 | Business Systems Analyst Epsilon Company |
| 4/19/19 | Robert A. Martin 15 Berrywood Lane Beverly, MA 01915 | 100 | |
| 4/28/19 | Douglas Melnyum 18 Pedras St. Windham, NH 03087 | 100 | |
| 7/4/19 | Cynthia Muldoon 50 Blueberry Hill Lane Sudbury, MA 01776 | 250 | Sales rep. Coty Cosmetics |
| 7/4/19 | Michael Muldoon 50 Blueberry Hill Lane Sudbury, MA 01776 | 200 | Consultant PwC Strategy |
| 5/20/19 | Robert Nass 2 Berkeley Ave. Beverly, MA 01915 | 200 | retired |
| 8/5/19 | Patrick Pearce 224 Dodge St. Beverly, MA 01915 | 100 | |
| 5/8/19 | Michael Petkavich 60 Trask St. Beverly, MA 01915 | 100 | |
| 5/16/19 | John Putney 39 Berrywood Lane Beverly, MA 01915 | 100 | |
| 9/15/19 | John Racho 395 Linbrook Rd. Ipswich, MA 01938 | 100 | |
| 5/16/19 8/24/19 | Dennis Roy 6 Blake St. Beverly, MA 01915 | 200 | CHA Endicott College |
| 5/1/19 | Thomas Vasile 38 Trask St. Beverly, MA 01915 | 100 | |
| 4/28/19 | Barry Wescott 17 Somerset Ave. Beverly, MA 01915 | 250 | Operations Manager Instant Alarm Co. |
| 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.

SCHEDULE A: RECEIPTS (continued)

| Date Received | Name and Residential Address (alphabetical listing required) | Amount | Occupation & Employer (for contributions of \$200 or more) |
|---------------|---|--------|---|
| 10/20/19 | Michael Wheeler 2 Myraell Rd. Beverly, MA 01915 | 100 | |
| 10/17/19 | Donald Way 53 Juniper Dr. Saugus, MA 01906 | 100 | |
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Line 9: Total Receipts over \$50 (or listed above) 3,575

Line 10: Total Receipts \$50 and under* (not listed above) 1,250

Line 11: TOTAL RECEIPTS IN THE PERIOD 4,825

← 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.)

| Date Paid | To Whom Paid (alphabetical listing) | Address | Purpose of Expenditure | Amount |
|--|--|--|------------------------|-----------------|
| 8/8/19 | BHS PTSD | Solier Rd. Beverly, MA 01915 | Sign | 100 |
| 8/27/19 | MP + C | 100 Comm. Ctr., Ste. 210D Beverly, MA 01915 | literature | 1,079.38 |
| 6/22/19 | Staples | 65 Daphtz St. Beverly, MA 01915 | Copies | 100.07 |
| 10/16/19 | Thriftco | 56 Pulaski St. Peabody, MA 01960 | literature/mailings | 1,500 |
| 10/18/19 | Thriftco | 56 Pulaski St. Peabody, MA 01960 | literature/mailings | 738.06 |
| 6/19/19 | USPS | 151 Rantoul St. Beverly, MA 01915 | bulk rate permit | 635 |
| 9/20/19 | Zampitella Creative | 4 Elm St. Ipswich, MA 01938 | graphic designer | 500 |
| 10/20/19 | Zampitella Creative | 4 Elm St. Ipswich, MA 01938 | graphic designer | 350 |
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| Line 12: Total Expenditures over \$50 (or listed above) | | | | 4,932.51 |
| Line 13: Total Expenditures \$50 and under* (not listed above) | | | | 111.74 |
| Line 14: TOTAL EXPENDITURES IN THE PERIOD | | | | 5,044.25 |

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 on page 1.

| Date Received | From Whom Received* | Residential Address | Description of Contribution | Value |
|--|---------------------|---------------------|-----------------------------|-------|
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| Line 15: In-Kind Contributions over \$50 (or listed above) | | | | |
| Line 16: In-Kind Contributions \$50 & under (not listed above) | | | | |
| Line 17: TOTAL IN-KIND CONTRIBUTIONS | | | | - 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 |
|---------------------------|-------------|---------|---|--------|
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| Enter on page 1, line 7 → | | | Line 18: TOTAL OUTSTANDING LIABILITIES (ALL) | - 0 - |