



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: MALDEN, MASS. Beginning Date: 1-1-2018 Ending Date: 12-31-2018

Type of Report: (Check one)

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

PAUL A CONDON
Candidate Full Name (if applicable)
WARD 2 CITY COUNCILLOR
Office Sought and District
52 GALE ST., MALDEN, MA 02148
Residential Address
E-mail: PAC813@gmail.com
Phone # (optional): 781-870-0098

Committee to Re-elect PAUL A. CONDON
Committee Name
JEAN CONDON
Name of Committee Treasurer
52 GALE ST., MALDEN, MA 02148
Committee Mailing Address
E-mail: SC06210704@gmail.com
Phone # (optional): 781-504-6302

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>2073.00</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>2073.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>920.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>1153.00</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>People's United</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: Jean F. Condon (Treasurer's signature) Date: 1-9-2019

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.

Paul A. Condon Date: 1-9-2019

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)	0
Line 10: Total Receipts \$50 and under* (not listed above)	0
Line 11: TOTAL RECEIPTS IN THE PERIOD	0

← 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 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
CK#159 7/25/18	ANCIENT Order of HIBERNIANS	259 Charles St Malden MA 02148	EdeLMAN Scholarship Fund (DONATION)	\$110.00
CK#157 6/14/18	HAMMERSLEY Family Fire Fund	90 Ashland St Malden, MA 02148	DONATION	\$100.00
CK#160 8/6/18	MALDEN Lacrosse (J Cahill)	150 Forest St Malden MA 02148	DONATION	100.00
CK#163 10/30/18	Neurofibromatosis N.E. (K Bariss)	60 GALE St Malden, MA 02148	DONATION	100.00
CK#155 3/27/18	ST ROCCO FRATERNAL ASSOC/ORG (J MOVER)	144 Marble St Stoneham, MA (J MOVER) 02180	Fundraiser/ Ad book	210.00
CK#161 8/16/18	ST ROCCO FRATERNAL ASSOCIATION YORG (J MOVER)	144 MARBLE St STONEHAM, MA 02180	DONATION	100.00

Line 12: Total Expenditures over \$50 (or listed above)	720.
Line 13: Total Expenditures \$50 and under* (not listed above)	200
Line 14: TOTAL EXPENDITURES IN THE PERIOD	920.00

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