



Commonwealth of Massachusetts

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: JULY 1, 2017 Ending Date: OCTOBER 20, 2017

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

MICHAEL E DRUMMEY
Candidate Full Name (if applicable)
MALDEN SCHOOL COMMITTEE WARD 1
Office Sought and District
21 OXFORD STREET WALDEN, MA 02148
Residential Address
E-mail: MEDS76@COMCAST.NET
Phone # (optional): _____

COMMITTEE TO ELECT MICHAEL E DRUMMEY
Committee Name
MEGHAN E. DRUMMEY
Name of Committee Treasurer
21 OXFORD STREET, WALDEN, MA 02148
Committee Mailing Address
E-mail: MEGDRUMMEY@GMAIL.COM
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>- 0 -</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$895.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$895.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$569.33</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$325.67</u>
Line 6: Total in-kind contributions this period (page 6)	<u>\$256.00</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>- 0 -</u>
Line 8: Name of bank(s) used:	<u>CENTURY 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: Meghan E. Drummy (Treasurer's signature) Date: 10/25/17

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: [Signature] (Candidate's signature) Date: 10/25/2017

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)
6/1/2017	EDWARD COLLINS 12 WADSWORTH ST MALDEN, MA 02148	\$45.00	
6/1/2017	MARY ANN CURLEY 12 WADSWORTH STREET MALDEN, MA 02148	\$25.00	
6/1/2017	ELEAZOR & DANA CUSHING 30 GOULD AVE MALDEN, MA 02148	\$45.00	
6/1/2017	MARGARET E. DRUMMEY 44 NEWCOMB ROAD STONHAM, MA 02185	\$100.00	
6/1/2017	EARL & CHRISTAN FITZPATRICK 97 GEORGIA RD TEWKSBURY, MA 01876	\$100.00	
6/1/2017	NANCY & CHARLES HORTON 26 PRATT STREET MALDEN, MA 02148	\$50.00	
6/1/2017	JERRY LEONE (CTE) 91 WEBSTER STREET MALDEN, MA 02148	\$30.00	
6/1/2017	EDWIN C. LUCEY 116 DANIELS STREET MALDEN, MA 02148	\$25.00	
6/1/2017	GREG LICEY 30 HUNTLEY STREET MALDEN, MA 02148	\$100.00	
6/1/2017	MAIN STREET FAMILY PRACTICE 675 MAIN STREET MELROSE, MA 02176	\$50.00	
6/1/2017	JOHN P. MATHESON 15 BOWLER STREET MALDEN, MA 02148	\$50.00	
6/1/2017	ANTHONY SPADAFORA 57 EAST BORDER ROAD MALDEN, MA 02148	\$100.00	
Line 9: Total Receipts over \$50 (or listed above)		\$720.00	
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)
6/1/2017	KARLO & KEVIN REAMER 60 FAIRMONT STREET MALDEN, MA 02148	\$25.00	
Line 9: Total Receipts over \$50 (or listed above)		\$745.00	
Line 10: Total Receipts \$50 and under* (not listed above)		150.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$895.00	← 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 (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
8/30/2017	BJ'S WHOLESALE	278 MIDDLESEX AVE MEDFORD, MA 02155	BREAKFAST AT FERRYWAY FOR TEACHERS	\$192.33
8/1/2017	DELUXE CHECK.COM	ON LINE	CHECK FOR CAMPAIGN ACCOUNT	\$23.99
8/28/2017	DOLLARTREE STORE	100 GRANT ST. QUINCY, MA 02169	PLATES, NAPKINS AND LITERALS FOR TEACHER BREAKFAST @ FERRYWAY SCHOOL	\$14.88
7/24/2017	MINUTEMAN PRESS	988 EASTERN AVE MALDEN, MA 02148	RE-ELECTION LAWS STUBS STUBS + FUND RAISER INVITATIONS	\$338.13
Line 12: Expenditures over \$50 (or listed above)				\$569.33
Line 13: Expenditures \$50 and under* (not listed above)				- 0 -
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$569.33

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
4/1/2017	ANTHONY'S of MALDEN	105 CANAL STREET MALDEN, MA 02148	FUNDRAISER FOOD	\$256.80
Line 15: In-Kind Contributions over \$50 (or listed above)				\$256.80
Line 16: In-Kind Contributions \$50 & under (not listed above)				— 0 —
Line 17: TOTAL IN-KIND CONTRIBUTIONS				\$256.80

Enter on page 1, line 6 →

* 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.