



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Form

File with: City or Town Clerk or Election Committee

Fill in Reporting Period Dates: Beginning Date 01/01/17 Ending Date 10/20/17

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

Barbara Murphy
Full Name of Candidate (if applicable)
Councilor - Ward 5
Office Sought and District
28 Forest St, Malden, MA 02148
Residential Address
Telephone Number (Optional)

Committee to Elect Barbara Murphy
Committee Name
Julie Greenbaum
Name of Committee Treasurer
28 Forest St, Malden, MA 02148
Committee Mailing Address
Telephone Number (Optional)

SUMMARY BALANCE INFORMATION
Line 1: Ending balance from previous report \$4,795.98
Line 2: Total receipts this period (page 3, line 1) \$25.00
Line 3: Subtotal (line 1 plus line 2) \$4,820.98
Line 4: Total expenditures this period (page 5, line 14) \$1,504.47
Line 5: Ending balance (line 3 minus line 4) \$3,316.51
Line 6: Total in-kind contributions this period (page 6) \$-
Line 7: Total (all) outstanding liabilities (page 7) \$-
Line 8: Name of bank (s) used: Citizen's Bank

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...
Signed under the penalties of perjury: [Signature] (Treasurer's Signature) Date: October 20, 2017

FOR CANDIDATE FILING ONLY: (Candidate must sign below)

Affidavit if Candidate: (check 1 box only)
[Candidate with committee and no activity independent of 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...
[X] Candidate without committee OR Candidate with independent activity filing separate report
Signed under the penalties of perjury: [Signature] (Candidate's Signature) Date: October 20, 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 the report, if additional pages are requires 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)	\$-
Line 10: Total Receipts \$50 and under* (not listed above)	\$25.00
Line 11: TOTAL RECEIPTS THIS PERIOD	\$25.00

← Enter on page 1, line 2

*If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should only include 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 the report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (Alphabetical Listing)	Address	Purpose of Expenditure	Amount
01/27/17	The Advocate Newspaper	PO BOX 490407 Everett, MA 02149	Advertisement	\$175.00
08/01/17	The Advocate Newspaper	PO BOX 490407 Everett, MA 02149	Advertisement	\$200.00
01/27/17	Forrestdale PTO	Malden, MA 02148	Donation	\$100.00
01/27/17	Malden Reads	145 Pleasant St, Malden, MA 02148	Community Centered Programming	\$100.00
03/30/17	Malden Youth Baseball	180 Kennedy Dr, #205 Malden, MA 02148	Donation	\$150.00
08/24/17	Malden Youth Lacrosse	150 Forest St Malden, MA 02148	Donation	\$100.00
01/27/17	Murphy, Barbara	28 Forest St, Malden, MA 02148	Xmas Holiday Cards	\$115.58
09/26/17	Murphy, Barbara	28 Forest St, Malden, MA 02148	Reimbursement of campaign expenses for function	\$90.85
08/01/17	Spadafora Slush Co	136 Highland Ave Malden, MA 02148	Function	\$100.00
03/30/17	YWCA	54 Washington St Malden, MA 02148	Donation	\$175.00
Line 12: Expenditures over \$50 (or listed above):				\$1,306.43
Line 13: Expenditures \$50 and under* (not listed above)				\$198.04
Enter on page 1, line 4 Line 14 : TOTAL EXPENDITURES IN THE PERIOD				\$1,504.47

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should only include those expenditures not itemized above.