



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/2019 Ending Date: 08/30/2019

Type of Report: (Check one)

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

Beth Anne Cornell
Candidate Full Name (if applicable)
School Committee Member Salem, MA
Office Sought and District
18 Briggs St, Salem, MA 01970
Residential Address
E-mail: bethanne@cornell4salem.com
Phone # (optional): 978 745-0267

BETH ANNE CORNELL COMMITTEE FUND
Committee Name
Susan Cooke
Name of Committee Treasurer
18 Briggs St, Salem, MA 01970
Committee Mailing Address
E-mail: bethanne@cornell4salem.com
Phone # (optional): 978 745-0267

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>—</u>
Line 2: Total receipts this period (page 3, line 11)	<u>3915.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>3915.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>3024.90</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>890.10</u>
Line 6: Total in-kind contributions this period (page 6)	<u>600.00</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>401.74</u>
Line 8: Name of bank(s) used:	<u>Salem Five</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: Susan Cooke (Treasurer's signature) Date: 09/05/2019

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, 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. 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: [Signature] (Candidate's signature) Date: 09/06/2019

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)
06/16/2019	Baird, Susannah 10 Carpenter Street Salem, MA 01970	50.00	
07/22/2019	Bernier, Ronald 150 Chandler St., Apt. 2 Boston, MA 02116	50.00	
06/25/2019	Cornell, Daniel 18 Briggs St Salem, MA 01970	200.00	Retired RN
06/21/2019	Cederholm, Dan 32 Osborne Hill Dr. Salem, MA 01970	100.00	
06/21/2019	Driscoll, Kim 16 Glenn Ave Salem, MA 01970	50.00	
06/22/2019	Fox, Jessica 12 Barcelona Ave Salem, MA 01970	100.00	
06/21/2019	Grinarmi, Giovanna 8 Auburn Road Salem, MA 01970	50.00	
06/27/2019	Guarino, David 4 Carpenter St Salem MA 01979	200.00	Partner-Melwood Global Consultants
08/29/2019	Hapworth, Ty 6 Brown St Salem, MA	50.00	
06/21/2019	Johnson, Cynthia 13 River St Salem, MA 01970	50.00	
06/19/2019	Madore, Christine 20 Federal St, Unit 8 Salem, MA 01970	75.00	
08/21/2019	Milaszewski, Leonard 20 Juniper Ave Salem, MA 01970	50.00	
Line 9: Total Receipts over \$50 (or listed above)		1025.00	
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)
06/19/2019	Monahan, Ana & Sean Hemenway Road Salem, MA 01970	1,000.00	Ana: Stay at home Mother Sean: Lawyer at Choate Hall & Stewart LLP
08/12/2019	Murphy, Kerry 10 1/2 MALL ST SALEM, MA 01970	50.00	
07/26/2019	Pabich, Diane 35 Winter Island Road Salem, MA 01970	200.00	Retired
08/21/2019	Pabich, Diane & Richard 35 Winter Island Road Salem, MA 01970	100.00	
07/22/2019	Ricciarelli, Betsy 397 Essex Street Apt 1 Salem, MA 01970	50.00	
06/19/2019	Romer, Brian 45 Forrester St #2 Salem, MA 01970	100.00	
06/19/2019	Sarcione, Mark 9 Pearl St Salem, MA 01970	100.00	
06/19/2019	Schiller, Ellen 14 Broad St Salem, MA 01970	400.00	Artist/Owner Hey Blue Handmade
06/19/2019	Schiller, Ellen & Jeremy 14 Broad St Salem, MA 01970	250.00	Ellen: Hey Blue Handmade Artist/Owner Jeremy: Radiologist Mount Auburn Hospital
06/19/2019	Stella, Matt 22 Oliver St Salem, MA 01970	100.00	
06/17/2019	Suresh-Menon, Durga 404 Sheffield Way Saugus, MA 01906	100.00	
08/21/2019	Wilson, Kris 27 Juniper Ave Salem, MA 01970	75.00	
07/19/2019	Yarrington, Jason 2 Gifford Court Salem, MA 01970	100.00	

Line 9: Total Receipts over \$50 (or listed above) 3650.00

Line 10: Total Receipts \$50 and under* (not listed above) 265.00

Line 11: TOTAL RECEIPTS IN THE PERIOD 3915.00

← 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

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
09/01/2019	Act Blue	PO Box 441146 Somerville, MA 02144-0031	Deduction for technical support for Contributions made through Act Blue	54.16
07/02/2019	Cornell, Matthew	18 Briggs St Salem, MA 01970	Refund for payment to Old Main St on 06/19/2019 for campaign kick off	800.00
07/02/2019	Indresano, Kim	45 Forrester St Salem, MA 01970	Photos for campaign by Kim Indresano Photography	600.00
07/06/2019	Indresano, Kim	45 Forrester St Salem, MA 01970	Lens cap for photo shoot	150.00
06/19/2019	Old Main St Pub	121 Essex St Salem, MA 01970	Waitress Tip	170.00
07/19/2019	Thriftco Speed Printing	56 Pulaski St Peabody, MA 01960	Campaign Signs + PALM CARDS	300.00
07/23/2019	Thriftco Speed Printing	56 Pulaski St Peabody, MA 01960	Campaign Signs + PALM CARDS	482.48
08/30/2019	Thriftco Speed Printing	56 Pulaski St Peabody, MA 01960	Campaign Signs + PALM CARDS	438.65
Line 12: Total Expenditures over \$50 (or listed above)				2995.29
Line 13: Total Expenditures \$50 and under* (not listed above)				29.61
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				3024.90

* 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 B: EXPENDITURES (continued)[illegible]

* 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
07/02/2019	Indresano, Kim	45 Forrester St Salem, MA 01970	Photos for campaign by Kim Indresano Photography	600.00
		Line 15: In-Kind Contributions over \$50 (or listed above)	600.00	
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
Enter on page 1, line 6 →		Line 17: TOTAL IN-KIND CONTRIBUTIONS	600.00	

* 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.

[illegible]

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

\$401.74