



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2019 SEP -9 AM 9:58

CITY CLERK
SALEM, MASS.

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

3/6/2019

Ending Date:

8/31/19

Type of Report: (Check one)

☒ 8th day preceding preliminary

☐ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

MARIBEL STEADMAN

Candidate Full Name (if applicable)

COUNCILOR- AT-LARGE

Office Sought and District

6 LOWELL ST. SALEM, MA 01970

Residential Address

E-mail: mbellesteadman@comcast.net

Phone # (optional):

COMMITTEE TO ELECT BELLE STEADMAN

Committee Name

MICHAEL BICKFORD

Name of Committee Treasurer

6 LOWELL ST., SALEM, MA 01970

Committee Mailing Address

E-mail: mbellesteadman@comcast.net

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

N/A

Line 2: Total receipts this period (page 3, line 11)

\$ 4,955.00

Line 3: Subtotal (line 1 plus line 2)

Line 4: Total expenditures this period (page 5, line 14)

\$ 4,733.60

Line 5: Ending Balance (line 3 minus line 4)

\$ 221.40

Line 6: Total in-kind contributions this period (page 6)

Line 7: Total (all) outstanding liabilities (page 7)

N/A

Line 8: Name of bank(s) used:

EASTERN 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, 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:

Michael Bickford

(Treasurer's signature)

Date: 9-8-19

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:

M. Steadman

(Candidate's signature)

Date: 9/8/19

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)
3/4/2019	VIRGINIA JOHNSON 75 COLUMBUS AVE., SALEM, MA	\$150.00	
3/22/2019	MARK STEADMAN 6 LOWELL ST., SALEM, MA	\$300.00	RETIRED
3/25/2019	DEBORAH C. PRENTICE 10 HARDY ST., SALEM, MA	\$100.00	
3/24/2019	ERNEST NOONAN		
5/9/2019	ABEL ALPUERTO 12 WAYNE RD. PEABODY, MA 01962	\$50.00	
5/9/2019	MICHAEL DICKFORD 8 ISLAND AVENUE, SALEM, MA	\$200.00	PLUMBER
5/5/2019	J. RONALD BOGAN 12 NORTH RIDGE RD. 19 AILE STREET, BEVERLY, MA	\$75.00	
4/4	WILLIAM & SALLIE CASS 92 COLUMBUS AVE, SALEM	\$25.00	
5/9	WILLIAM & SALLIE CASS 92 COLUMBUS AVE, SALEM, MA	\$100.00	
5/9	LEONARD & CLAIRE CAULEY 61 COLUMBUS AVE, SALEM	\$100.00	
4/3	MARINA CLARK 41 STATION RD, SALEM	\$50.00	
5/8	STEVEN CODDENS 24 PARALLEL ST, SALEM	\$500.00	RETIRED

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

\$500.00

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

\$50.00

Line 11: TOTAL RECEIPTS IN THE PERIOD

\$550.00

← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
2/27/2019	GEORGE COELHO 15 SUMMIT ST. SALEM	\$40.00	
5/9/2019	JEFFREY & TOBBY CHANNEN 38 STATION RD., SALEM	\$100.00	
4/3/2019	MIRINA CLARK 41 STATION RD., SALEM	\$50.00	
5/3/2019	STEVEN COOPENS 24 PARALLEL ST., SALEM	\$300.00	RETIRED
3/27/2019	GEORGE COELHO 15 SUMMIT ST., SALEM	\$40.00	
5/9/2019	DOMINGO DOMINGUEZ 18 RAYMOND RD., SALEM	\$20.00	
3/24/2019	JAMARA TABRE 4 BORDER ST. SALEM	\$100.00	
5/9/2019	TIMOTHY & GREICHEN FLYNN 42 SABLE RD., SALEM	\$25.00	
3/24/2019	JAMARA TABRE 4 BORDER ST. SALEM	\$100.00	
4/10/2019	ALBERT FONTAINE 8 TREMONT ST., SALEM, MA	\$25.00	
5/9/2019	KATHIE GAUTHIER 52 BAYVIEW, SALEM	\$50.00	
8/27/2019	ALISTAR & STEVEN HARRIS 63 PROCTOR ST., SALEM UNIT 2	\$25.00	
3/6/2019	VIRGINIA JOHNSON 75 COLUMBUS AVE, SALEM	\$50.00	
4/2/2019	JAMES & KATHERINE KLINE 43 BAYVIEW AVE, SALEM, MA	\$50.00	
5/9/2019	JAMES & KATHERINE KLINE 43 BAYVIEW AVE, SALEM, MA	\$100.00	
Line 9: Total Receipts over \$50 (or listed above)		\$800.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$335.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$1,135	← 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
3/27/2019	ROGER LAMONTAGNE			

Line 12: Total Expenditures over \$50 (or listed above)

Line 13: Total Expenditures \$50 and under* (not listed above)

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD

* 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/27/2019	ROGER LAMONTAGNE 30 WAYNE ST., UNIT 4, SALEM	\$100.00	
4/6/2019	DENISE DENISE LEE 12 OAK VIEW AVE, SALEM, MA	\$20.00	
6/9/2019	ROGER & MARIE LEGER 64 MARLBOROUGH, SALEM, MA	\$50.00	
5/9/2019	CHERYL LEONARD 487 HUMPHREY ST. #2 SQUAMSCOTT, MA	\$25.00	
SEP 7/3/2019	STEPHEN LEE 12 SUMMIT ST. SALEM	\$30.00	
5/9/2019	MATTHEW & ELIZABETH MACDONALD 35 SUFFOLK AVE. SQUAMSCOTT, MA	\$100.00	
6/2/2019	MARY MADORE & PAMELA MACARTNEY 31 FORRESTER ST., SALEM, MA	\$25.00	
7/29/2019	M/C (no itemization)	\$25.00	
3/24/2019	DONNA MICHARD 12 BRIDGE ST., SALEM, MA	\$100.00	
3/27/2019	KATHERINE MILLETT 12 1ST ST., SALEM, MA APT 106	\$10.00	
5/9/2019	MICHAEL & LISA MORENCY 2 STAR AVE., SALEM	\$50.00	
3/24/2019	WILLIAM MURPHY 7 PARLEE ST., SALEM	\$50.00	
8/24/2019	WILLIAM MURPHY 7 PARLEE ST. SALEM	\$100.00	
4/3/2019	LISA NICKLOW 33 OSGOOD ST., SALEM, MA	\$50.00	
3/24/2019	ERNEST NOONAN 1000 LONG AVE, APT. A-42 SALEM, MA	\$25.00	

Line 9: Total Receipts over \$50 (or listed above) \$400.00

Line 10: Total Receipts \$50 and under* (not listed above) \$360.00

Line 11: TOTAL RECEIPTS IN THE PERIOD \$760.00

← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5/9/2019	MICHAEL STETA 2 HANTHORNE BLVD. UNIT 3	\$25.00	
7/4/2019	TODD SIEGEL 540 REVERE BEACH BLVD. UNIT 545 REVERE, MA	\$100.00	
5/9/2019	RAYMOND & ELLEN SIMARD 37 HILLSIDE AVENUE, SALEM	\$100.00	
3/25/2019	TERRY & ANNE ST. PIKRE 36 MARCH ST., SALEM, MA	\$100.00	
5/9/2019	TODD STACY 20 WALER ST., SALEM, MA	\$15.00	
5/7/2019 3/22/2019 4/4/2019	MARIBEL STEADMAN 6 LOWELL ST. SALEM MARK STEADMAN 6 LOWELL ST. SALEM	\$600.00 \$300.00 \$400.00	CLINICAL LAB SCIENTIST - NSMC RETIRED
5/9/2019	MARY & RICHARD RODERICK 7 SUTTON ST., SALEM, MA	\$25.00	
8/31/2019	PHIL YATES 2 GIFFORD COURT, SALEM	\$25.00	

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

\$1600.00

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

\$90.00

Line 11: TOTAL RECEIPTS IN THE PERIOD

\$1,690.00

← 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
8/7	SALEM CITY HALL	93 WASHINGTON ST, SALEM	POLL BOOK	\$25.00
7/10	SALEM POST OFFICE	2 MARGIN ST. SALEM, MA	STAMPS FOR MAILING	\$33.00
4/12	SALEM WATERFRONT HOTEL	225 Derby St Salem, MA	CAMPAIGN KICK OFF	\$433.74
5/24	STAPLES	17 PARADISE RD SALEM, MA	1 BANNER	\$114.53
5/20	"	"	1 BANNER	\$114.48
6/4	"	"	2 BANNERS	\$228.98
6/14	"	"	2 BANNERS	\$215.52
3/22	THRIFTCO PRINTING	56 PULASKI ST PEABODY MA	100 YARD SIGNS	\$495.00
	"	"	100 BUMPER STICKERS	\$195.00
	"	"	100 WIREFRAMES	\$100.00
4/10	"	"	100 STAND-OUT SIGNS	\$295.00
	"	"	3,000 PDM CARDS	\$599.60
Line 12: Total Expenditures over \$50 (or listed above)				\$2791.85
Line 13: Total Expenditures \$50 and under* (not listed above)				\$58.00
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$2849.85

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.

• • •

A grid of 10x10 squares, with a large 'X' drawn across it. The 'X' is formed by two diagonal lines intersecting in the center of the grid. The lines are drawn with a dark, slightly irregular stroke, suggesting they were drawn by hand. The grid lines are thin and black. The overall image is a simple geometric pattern.

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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.

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Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4/10	THRIFT CO PRINTING	56 PULASKI ST. PEABODY, MA	100 RECTANGULAR BUTTONS	\$ 139.60
4/10	"	"	ARTWORK FOR PRINTING	\$ 105.00
5/28	THRIFT CO PRINTING	"	50 YARD SIGNS	\$ 369.50
5/28	"	"	50 WIRE FRAMES	\$ 62.50
6/18	THRIFT CO PRINTING	"	1000 BUSINESS CARD	\$ 135.00
6/18	"	"	ARTWORK FOR PRINTING	\$ 30.00
7/22	THRIFT CO PRINTING	"	54 YARD SIGNS	\$ 395.80
7/22	"	"	54 WIRE FRAMES	\$ 67.50
7/22	"	"	2 BANNERS	\$ 298.00
8/6	THRIFT CO	56 PULASKI ST PEABODY, MA	1000 BUSINESS CARDS	\$ 135.00
	"	"	50 BUMPER STICKERS	\$ 145.85

Line 12: Total Expenditures over \$50 (or listed above)

Line 13: Total Expenditures \$50 and under* (not listed above)

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD

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

\$ 1853.25
~~\$ 1350.45~~
\$ 30.00
~~\$ 1000.45~~
\$ 1883.25
Page 4

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)

