

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Ca2014 grand Political Einance

of Massachusetts CITY CLERK File with	City or Town Clark or Floation Commission
Fill in Reporting Period dates:  Beginning Date:  08/26/2011 EM. MASSing Date:	1: City or Town Clerk or Election Commission 10/20/2017
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election 30 day after election y	/ear-end report
Christine Madore Committee to Elect Christine M	
Candidate Full Name (if applicable)  City Councilor, Salem, MA- Ward 2  Robert Madore	mittee Name
Office Sought and District Name of Co	mmittee Treasurer
20 Federal St. #8, Salem, MA 01970 20 Federal St. #8, Salem, MA 0	
	Mailing Address
The state of the s	
Phone # (optional): (781) 571-1195 Phone # (optional):	(781) 571-1642
SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	045.20
	945.29
Line 2: Total receipts this period (page 3, line 11)	1,100
Line 3: Subtotal (line 1 plus line 2)	2,045.29
Line 4: Total expenditures this period (page 5, line 14)	858.67
Line 5: Ending Balance (line 3 minus line 4)	1,186.62
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	19.48
Line 8: Name of bank(s) used: Salem Five	
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 common activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L.  Signed under the penalties of perjury:  (Treasurer's signature	g period and represents the campaign . c. 55.
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 activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. incurred any liabilities nor made any expenditures on my behalf during this reporting period.	d complete statement of all campaign finance . 55. I have not received any contributions,
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 finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirem  Signed under the penalties of perjury:  (Candidate's signature)	reporting period and represents the nents of M.G.L. c. 55.

#### **Schedule A: Receipts (Committee to Elect Christine Madore)**

Date	First Name	Last Name	Contribution	Address	City	ZIP	State	Occupation	Employer
8/27/2017	Thomas	O'Donnell	\$ 200.00	80 Washington Square	Salem	01970	MA	Funeral Director	Henry J. O'Donnell & Sons Inc
8/31/2017	Teury	Marte	\$ 25.00	38 Forest St	Peabody	01960	MA	Area Director	Mass Rehab Commission
9/1/2017	Emily	Torres-Culinane	\$ 100.00	6 Jo-Anne Terrace	Dorchester	02124	MA	Community Engagement Manager	MAPC
9/11/2017	Richard	Poisson	\$ 50.00	7 Ash St.	Salem	01970	MA	Not Employed	Not Employed
9/11/2017	Eric	Hove	\$ 25.00	20 Robinwood Ave	Jamaica plain	02130	-	Planner	Марс
9/12/2017	Vince	Swiniuch	\$ 50.00	72 Washington Sq	Salem	01970	_	Tax Advisor	The second secon
9/12/2017	Nancy	Sachettí	\$ 50.00	72 Washington Square East	Salem	01970	MA		
9/13/2017	Steve	Immerman	\$ 250.00	20 Federal St Unit 5	Salem	01970	MA	College President	Montserrat College of Art
9/13/2017	Jo Anne	Famico	\$ 100.00	74 Proctor Street	Salem	01970		Managed Care Specialist	North Shore Medical Center
9/15/2017	Shimon	Avish	\$ 50.00	33 Pleasant St.	Salem	01970		Consultant	BCD Meetings & Events
10/6/2017	Dan	Donato	\$ 25.00	20 New Derby Street	Salem	01970	MA	Business Owner	OctoCog
10/11/2017	George	Claassen	\$ 25.00	17 Fowler St	Salem	01970	MA	Insurance Agent	Class Insurance
10/17/2017	David	Pelletier	\$ 50.00	31 Pleasant Street	Salem	01970	MA	Not Employed	Not Employed
10/18/2017	Shimon	Avish	\$ 50.00	33 Pleasant St.	Salem	01970		Consultant	BCD Meetings & Events
10/19/2017	Kim	Driscoll	\$ 50.00	16 Glenn Ave	Salem	01970		Mayor	City of Salem
L.	Line 9: Total receipts in ex	cess of \$50 (or listed above)	\$ 1,100.00			-			12.7 5. 55.511
Lin	e 10: Total receipts \$50 a	nd under* (not listed above)	N/A						
	Line 11: TOT	AL RECEIPTS IN THE PERIOD	\$ 1,100.00	Enter on page 1, line 2					

Page 2

## Schedule B: Expenditures (Committee to Elect Christine Madore)

Date Paid	To Whom	Address	Purpose of Expenditure	Ar	
8/28/2017	Essex's N.Y. Pizza and Deli	2 E India Square Mall, Salem, MA, 01970	food for a campaign event	\$	40.62
8/28/2017	Stop & Shop	19 Howley St. Peabody, MA 01970	food for a campaign event	\$	37.45
8/29/2017	The Home Depot	50 Traders Way, Salem, MA 01970	materials for campaign signs	\$	7.33
9/12/2017	Milk and Honey Green Grocer	32 Church St. Salem, MA 01970	food for a campaign event	\$	71.61
9/12/2017	Dunkin'Donuts	60 Washington St. Salem, MA 01970	food for a campaign event	\$	22.98
9/12/2017	Adriatic Restaurant and Bar	155 Washington st, Salem, MA 01970	second half payment for catered event	\$	400.00
9/28/2017	Minit-Print	40 Boston St, Salem, MA 10970	door hangers	\$	260.00
10/14/2017	Nicholas Downing	10 Andrew St. apt. 3A, Salem, MA 01970	repayment for purchase of campaign supplies from CVS	\$	18.68
			Line 12: Expenditures over \$50	\$	858.67
	Line 13: Expenditures \$50 and ur		Line 13: Expenditures \$50 and under*	N/	Α
		Enter on page 1, line 4	Line 14: TOTAL EXPENDITURES	\$	858.67

## Schedule C: "In-Kind" Contributions (Committee to Elect Christine Madore)

Date Received	From Whom Received	om Whom Received Residential Address Description of Contribution		om Whom Received Residential Address Description of Contribution		Value
		,				
			Line 15: In-kind over \$50	\$ -		
			Line 16: In-kind \$50 and under	\$ -		
		Enter on page 1, line 6	Line 17: Total In-kind	\$ -		

Page 4

### Schedule D: Liabilities (Committee to Elect Christine Madore)

Date incurred	To Whom Due	Address	Purpose	ρ.	mount
9/22/2017	Christine Madore	20 Federal St. #8, Salem, MA 01970	pack of six clipboards	Ś	11.95
9/30/2017	Christine Madore	20 Federal St. #8, Salem, MA 01970	boost social media reach	Ś	7.53
		Enter on page 1, line 7	Line 18: Outstanding Liabilities (ALL)	\$	19.48

Page 4