



Commonwealth
of Massachusetts

2018 JAN 22 PM 12:43

CITY CLERK
SALEM, MASS.

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: 10/21/2017 Ending Date: 12/31/2017

Type of Report: (Check one)

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

Christine Madore Candidate Full Name (if applicable)	Committee to Elect Christine Madore Committee Name
City Councilor, Salem, MA- Ward 2 Office Sought and District	Robert Madore Name of Committee Treasurer
20 Federal St. #8, Salem, MA 01970 Residential Address	20 Federal St. #8, Salem, MA 01970 Committee Mailing Address
Telephone Number (optional): (781) 571-1195	Telephone Number (optional): (781) 571-1642

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	1,186.62
Line 2: Total receipts this period (page 3, line 11)	1,075.00
Line 3: Subtotal (line 1 plus line 2)	2,261.62
Line 4: Total expenditures this period (page 5, line 14)	1,768.64
Line 5: Ending Balance (line 3 minus line 4)	492.98
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:	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 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: [Signature] (Treasurer's signature) Date: 1/21/2018

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: 1/22/2018

Schedule A: Receipts (Committee to Elect Christine Madore)

Date	First Name	Last Name	Contribution	Address	City	ZIP	State	Occupation	Employer
10/23/2017	Patricia	Zaido	100	10Andrew 1A	Salem	01970	MA	Not Employed	Not Employed
10/23/2017	Jeffrey	Cyr	50	12 Conners Rd	Salem	01970	MA	Regulatory Affairs	Ocular Therapeutix
10/23/2017	Mark	Stevens	100	69 Summer Street	Salem	01970	MA	Director of Cash Management	ABP Corporation
10/23/2017	Douglas	Bowker	25	41 Forrester St. #2	Salem	01970	MA	3D Animation	Self-Employed
10/23/2017	Amy	McKeehan	25	6 Cromwell Street	Salem	01970	MA	Warranty Manager	Midea America Corp
10/23/2017	Richard	Pabich	150	35 Winter Island Road	Salem	01970	MA	Not Employed	Not Employed
10/23/2017	Adam	Howell	25	173 Federal Street	Salem	01970	MA	Software quality assurance engineer	Novetta
10/23/2017	Anthony	ODonnell	250	35 Washington square	Salem	01970	MA	Funeral director	Self-Employed
10/24/2017	Nicholas	Kiefer	200	13 Chestnut Street	Salem	01970	MA	Physician	Beverly Anesthesia Associates
11/3/2017	Richard	Poisson	25	7 Ash St	Salem	01970	MA	Not Employed	Not Employed
11/3/2017	Richard	Poisson	25	7 Ash St.	Salem	01970	MA	Not Employed	Not Employed
11/6/2017	Linda	Stark	100	11 Church St. Unit 305	Salem	01970	MA	Not Employed	Not Employed
Line 9: Total receipts in excess of \$50 (or listed above)			\$	1,075.00					
Line 10: Total receipts \$50 and under* (not listed above)				N/A					
Line 11: TOTAL RECEIPTS IN THE PERIOD			\$	1,075.00	Enter on page 1, line 2				

Schedule B: Expenditures (Committee to Elect Christine Madore)

Date Paid	To Whom	Address	Purpose of Expenditure	Amount
10/27/2017	United States Postal Service	2 Margin St., Salem, MA 01970	postage for mailers	\$ 49.00
10/31/2017	Facebook	1 Hacker Way, Menlo Park, CA 94025	boost social media reach	\$ 36.16
11/7/2017	Dunkin' Donuts	60 Washington st. Salem, MA 01970	food for a campaign event	\$ 22.98
11/7/2017	Milk and Honey Green Grocer	32 Church st. Salem, MA 01970	food for a campaign event	\$ 78.84
11/9/2017	Root NS Inc.	Shetland Park, 35 Congress Street, Suite 2350, Salem, MA 01970	food for a campaign event	\$ 150.50
11/27/2017	SpeakEasy Political	160 Pine St, Suite 700, San Francisco, CA, 94111	Direct Mailer campaign	\$ 1,400.00
11/30/2017	Facebook	1 Hacker Way, Menlo Park, CA 94025	boost social media reach	\$ 2.58
11/30/2017	Facebook	1 Hacker Way, Menlo Park, CA 94025	boost social media reach	\$ 28.58
Line 12: Expenditures over \$50				\$ 1,768.64
Line 13: Expenditures \$50 and under*				N/A
Line 14: TOTAL EXPENDITURES				\$ 1,768.64

Enter on page 1, line 4

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

Date Received	From 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	\$ -

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Schedule D: Liabilities (Committee to Elect Christine Madore)

Date Incurred	To Whom Due	Address	Purpose	Amount
		Enter on page 1, line 7	Line 18: Outstanding Liabilities (ALL)	\$ -

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