

Form CPF M 102: Campaign Finance Report Office of Campaign and Political Finance

File with: Director Office of Campaign and Political Finance One Ashburton Place Rm. 411 Boston, MA 02108 (617) 979-8300

2019 OCT 28 AM 8: 04

SALEM, MASS

Reporting Period: Beginning: 8/31/2019 Ending: 10/18/2019

Type of Report: 2019 Pre-election Report

Riccardi, Megan

Full Name of Candidate

Municipal, Local Filer

Office Sought/ District

23 Orchard Street Salem, MA 01970

Residential Address

Riccardi Committee

Committee Name

Paul Riccardi

Name of Committee Treasurer

23 Orchard Street Salem, MA 01970

Committee Address

POLLETT SIMPLED INFORMATION	
Ending balance from previous report:	\$2,670.27
Total receipts this period:	\$145.00
Subtotal:	\$2,815.27
Total expenditures this period:	\$500.17
Ending Balance:	\$2,315.10
Total inkind contributions this period:	\$0.00
Total out of pocket spending this period:	\$0.00
Total outstanding liabilities:	\$0.00
Name of Bank Used:	

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, inkind 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:

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Treasurer's signature (in ink)	State and the state of the stat

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, and 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 and 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, disbursements,

inkind 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:

Candidate's signature (in ink)

Mykina

Date 10.24.2019

10/27/19

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.

<u>Date</u> Name and Residential Addre 9/26/2019 Bowman, Sarah	ss		Occupation and Employer Scientist
26 Bradford Street		4	Directed Genomics
Salem, MA 01970			
9/18/2019 Coates, Kathleen		\$50.00	Strategic Planning Analyst
51 Hathorne Street			Staples
Salem, MA 01970			•
9/2/2019 Lash, Jennifer		\$10.00	
28 Balcomb Street			
Salem, MA 01970			
9/14/2019 Lash, Jennifer		\$25.00	Human Resources
28 Balcomb Street			Microfocus
Salem, MA 01970			
9/29/2019 Zimmer, Kristen		\$10.00	Transportation
6 1/2 Cushing St # 3			Lbk Transportation
Salem, MA 01970			
	Total Itemized Receipts:	\$145.00	
	Total Unitemized Receipts:	\$0.00	
	Total Receipts:	\$145.00	

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 over \$50 and under may be added together from committee records, and reported on line 13.

Date Name and Address		Amount	Purpose
9/1/2019 Act Blue Technical Service	ces		Service Fee
366 Summer Street		7 *****	
Somerville, MA 02143			
9/15/2019 Act Blue Technical Service	ces	\$0.99	Service Fee
366 Summer Street		, , , , ,	
Somerville, MA 02143			
9/22/2019 Act Blue Technical Service	es	\$1.98	Service Fee
366 Summer Street			
Somerville, MA 02143			
9/29/2019 Act Blue Technical Service	es	\$2.38	Service Fee
366 Summer Street			
Somerville, MA 02143			
10/1/2019 CVS		\$10.61	Thank You Cards
174 Main Street			
Peabody, MA 01960			
9/27/2019 Thriftco Printing		\$200.00	Deposit For Literature Printing
56 Pulaski Street			
Peabody, MA 01960			
10/1/2019 Thriftco Printing		\$272.81	Remaining Balance: 500 Palm Cards, 500 Door Hangers
56 Pulaski Street			_
Peabody, MA 01960			
10/1/2019 USPS		\$11.00	Stamps
13 Wallis Street			
Peabody, MA 01960			
	Total Itemized Expenditures:	\$500.17	
т	otal Unitemized Expenditures:	\$0.00	
	Total Expenditures:	\$500.17	