

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

2023 JUL 18 AM 10: 29

of Massachuseus	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	228 6/7/2023 Ending Date: 7/18/2023
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Type of Report: (Check one)	,
70 • • Control of the strategy - to colour 100 - at the strategy of the strate	⊠ 30 day after election
and any preceding premimary	
Thomas Ryan McMahon	Committee Name
Candidate Full Name (if applicable)	
Marblehead Board of Health Office Sought and District	Name of Committee Treasurer
1 Gregory St., Marblehead, MA 01945	
Residential Address	Committee Mailing Address
E-mail: TomMcMahonBOH@gmail.com	E-mail:
Phone # (optional): 781-704-8720	Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
Somman Brance	
Line 1: Ending Balance from previous report	0
	934.79
Line 2: Total receipts this period (page 3, line 11)	934.79
Line 3: Subtotal (line 1 plus line 2)	934.79
Line 3: Subtotal (fille 1 plus fille 2)	
Line 4: Total expenditures this period (page 5, lin	ne 14) 934.79
Line 5: Ending Balance (line 3 minus line 4)	0
	age 6) 1,598.00
Line 6: Total in-kind contributions this period (p.	age 6)
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 7. Total (all) outstanding habilities (page 7)	
Line 8: Name of bank(s) used: CapitalOne	
.03592	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be-	art of my knowledge and belief, a true and complete statement of all campaign finance
activity including all contributions, loans, receipts, expenditures, disbursements, in-king	d 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 i	in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Treasurer's signature)
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 b	box only)
Candidate with Committee	
Logific that I have examined this report including attached schedules and it is, to t	he best of my knowledge and belief, a true and complete statement of all campaign finance 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	ng 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 t finance activity, including contributions, loans, receipts, expenditures, disbursement	the best of my knowledge and belief, a true and complete statement of all campaign
finance activity, including contributions, loans, receipts, expenditures, disoursement campaign finance activity of all persons acting under the authority or on behalf of the company of	this candidate in accordance with the requirements of M.G.L. c. 55.
	Date: 7/18/2023
Signed under the penalties of perjury:	(Candidate's signature)

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)
/14/2023	Tom McMahon 1 Gregory St., Marblehead, MA 01945	49.00	Investment Management / Morgan Stanley
/18/2023	Tom McMahon 1 Gregory St., Marblehead, MA 01945	274.85	Investment Management / Morgan Stanley
/7/2023	Tom McMahon 1 Gregory St., Marblehead, MA 01945	610.94	Investment Management / Morgan Stanley
Line 9: Total Re	ceipts over \$50 (or listed above)	934.7	9
Line 10: Total Re	eceipts \$50 and under* (not listed above)		
Line 11: TOTAl	L RECEIPTS IN THE PERIOD	934.7	9 ← 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)
			1
- marie vas			
			1
Line 9: Total Re	ceipts over \$50 (or listed above)		
Line 10: Total R	eceipts \$50 and under* (not listed above)		
	L 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 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
6/14/2023	The Home Depot	50 Traders Way, Salem, MA 01970	Wooden Sign Holders	49.00
6/18/2023	The Home Depot	50 Traders Way, Salem, MA 01970	Wooden Sign Holders	274.85
7/7/2023	Sir Speedy Printing	98 N. Washington St., Boston, MA 02114	Lawn Signs / Banners	610.94
	_	Line 12: Total Expenditures	over \$50 (or listed above)	934.7
		Line 13: Total Expenditures	\$50 and under* (not listed above)	
	Enter on page 1, line 4	Line 14: TOTAL EXPEND	DITURES IN THE PERIOD	934.7

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

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SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
	Tim 12 Franchischer (1974)					
Line 12: Expenditures over \$50 (or listed above)						
Line 13: Expenditures \$50 and under* (not listed above)						
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD						
	Emer on page 1, mie 4		should include only those expandity			

^{*} 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.

ate Received	From Whom Received*	Residential Address	Description of Contribution	Value
2022 Campaign	Myself. Used from previous year's campaign	1 Gregory St., Marblehead, MA 01945	Lawn Signs used from last year's campaign	1,598.00
		Line 15: In-Kind Contributi	ons over \$50 (or listed above)	1,598.
		Line 16: In-Kind Contribution	ons \$50 & under (not listed above)	
		→ Line 17: TOTAL IN-KINI	CONTRIBUTIONS	1,598

^{*} 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.

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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.

Date Incurred	To Whom Due	Address	Purpose	Amount
	-			
	Enter on page 1, line 7	→ Line 18: TOTAL OUTST	ANDING LIABILITIES (ALL)	