



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

RECEIVED TOWN CLERK
BRAINTREE, MA

Office of Campaign and Political Finance

2019 OCT 28 PM 12:32

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: _____ Ending Date: _____

Type of Report: (Check one)

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

Lawrence C Mackin Jr.
Candidate Full Name (if applicable)

District 6 Town Council
Office Sought and District

10 Milton Rd. Braintree MA 02184
Residential Address

E-mail: larrymack16@gmail.com

Phone # (optional): 617-641-7476

Committee for Lawrence Mackin
Committee Name

Jeanne Mackin
Name of Committee Treasurer

10 Milton Rd. Braintree MA 02184
Committee Mailing Address

E-mail: larrymack16@gmail.com

Phone # (optional): 617-641-7476

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$ 0
Line 2: Total receipts this period (page 3, line 11)	\$ 3,800
Line 3: Subtotal (line 1 plus line 2)	\$ 3,800
Line 4: Total expenditures this period (page 5, line 14)	\$ 3,014 ²⁸ / ₁₀₀
Line 5: Ending Balance (line 3 minus line 4)	\$ 785 ⁷² / ₁₀₀
Line 6: Total in-kind contributions this period (page 6)	\$ 0
Line 7: Total (all) outstanding liabilities (page 7)	\$ 700 ⁰⁰ / ₁₀₀
Line 8: Name of bank(s) used:	<u>Citizens Bank</u>

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: Jeanne Mackin (Treasurer's signature) Date: 10/28/19

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: 10/28/19

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)
9/10/19	Avellino, Vincent Washington St. Braintree	50 ⁰⁰	
8/13/19	Bocanegra, Cecily 219 Atlantic Ave, Hull	200 ⁰⁰	Human Resources Cenergy International
10/10/19	Carly, Damien 22 Heath St. Quincy MA	250 ⁰⁰	Kostus Corpi LLC
10/10/19	Chan, Sing ming 64 G. St. South Boston	250 ⁰⁰	Liquor store owner
10/10/19	Gannon, Michael East 3rd St, South Boston	350 ⁰⁰	Firefighter (retired)
8/31/19	Griffin, Daniel Bramblewood Ave Braintree	100 ⁰⁰	
9/24/19	Hurley, Daniel Arbutus Ave, Braintree	50 ⁰⁰	
10/10/19	Kostus, Paul 31 Forest St. Braintree	1000 ⁰⁰	Bar Bartender Marriott Hotels
10/9/19	Lyons, Amanda Coventry, RI	100 ⁻	
8/31/19	Mackin, Lawrence 10 Milton Rd. Braintree	350 ⁻	Fidelity Investments Director (Jeanne Mackin)
9/10/19	Mackin, Lawrence Jr 10 Milton Rd. Braintree	300 ⁻	Security Consultant Steward Healthcare
8/10/19	Maloney, Michael Milton Rd, Braintree	200 ⁰⁰	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/9/19	Noto, Robert 180 Milton St. Dorchester	100 ⁰⁰ / ₀₀	
10/10/19	Stasio, Elizabeth	200 ⁰⁰ / ₀₀	Childcare Self employed
8/24/19	Todd, Patrick 8 Foster Rd. Braintree	200 ⁰⁰ / ₀₀	Bay State Generator Technician
8/24/19	Todd, Stephen 8 Foster Rd. Braintree	100 ⁰⁰ / ₀₀	

Line 9: Total Receipts over \$50 (or listed above) 3,700 —

Line 10: Total Receipts \$50 and under* (not listed above) 100 —

Line 11: TOTAL RECEIPTS IN THE PERIOD 3,800 — ← 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
8/28/19	Printing unlimited	63 Plymouth St Hobrook, MA	Campaign Printing	375 ⁵⁹ / ₁₀₀
9/5/19	↓	↓	↓	439 ⁶⁶ / ₁₀₀
9/11/19	↓	↓	↓	318 ⁷⁵ / ₁₀₀
10/3/19	Lawrence Meckin Jr	10 Milton Rd Braintree, MA	Payment to Greg Enton for Facebook Ads	200 ⁰⁰ / ₁₀₀
10/7/19	↓	↓	↓	100 ⁰⁰ / ₁₀₀
10/15/19	Printing unlimited	63 Plymouth St Hobrook, MA	Campaign Printing	375 ⁵⁹ / ₁₀₀
10/19/19	Punkin Donuts	Washington St Braintree	Coffee / Donuts for stand out	29 ⁸⁸ / ₁₀₀
10/21/19	Lawrence Meckin Jr	10 Milton Rd Braintree, MA	Payment to Greg Enton for FB Ads	100 ⁰⁰ / ₁₀₀
10/24/19	Printing unlimited	63 Plymouth St Hobrook, MA	Campaign Printing	453 ⁴⁸ / ₁₀₀
10/28/19	Printing unlimited	63 Plymouth St Hobrook, MA	Campaign Printing	621 ³⁷ / ₁₀₀
Line 12: Total Expenditures over \$50 (or listed above)				2,984 ⁴⁴ / ₁₀₀
Line 13: Total Expenditures \$50 and under* (not listed above)				29 ⁸⁸ / ₁₀₀
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				3,014 ³⁸ / ₁₀₀

* 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			Line 15: In-Kind Contributions over \$50 (or listed above)	
			Line 16: In-Kind Contributions \$50 & under (not listed above)	
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	

* 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.

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
9/10/19	Lawrence Mackin Jr.	10 Milton Rd Braintree	Personal Campaign Loan	300 ⁰⁰ ✓
10/3/19	↓	↓	Payment to Greg Eaten for Facebook Ads	200 ⁰⁰ ✓
10/7/19	↓	↓	↓	100 ⁰⁰ ✓
10/20/19	Lawrence Mackin Jr.	10 Milton Rd. Braintree	↓	100 ⁰⁰ ✓
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	700 ⁰⁰ ✓