



# Form CPF M 102: Campaign Finance Report

## Municipal Form RECEIVED

Office of Campaign and Political Finance

2024 MAY 13 AM 8:40

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 4/6/2024 Ending Date: 5/12/2024

Type of Report: (Check one)

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

**James A. MacDonald**  
Candidate Full Name (if applicable)

**Select Board**  
Office Sought and District

**29 Arlington Rd, dedham, MA 02026**  
Residential Address

E-mail: jimmacdonald2003@aol.com

Phone #: \_\_\_\_\_

**Committee to Elect Jim MacDonald**  
Committee Name

**Paula MacDonald**  
Name of Committee Treasurer

**29 Arlington Rd, Dedham, MA 02026**  
Committee Mailing Address

E-mail: \_\_\_\_\_

Phone #: \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

|  |            |
|--|------------|
| Line 1: Ending Balance from previous report                        | \$5,826.42 |
| Line 2: Total receipts this period (page 3, line 12)               | \$2,190.   |
| Line 3: Subtotal (line 1 plus line 2)                              | \$8,016.42 |
| Line 4: Total expenditures this period (page 5, line 15)           | \$660.     |
| Line 5: Ending Balance (line 3 minus line 4)                       | \$7,356.42 |
| Line 6: Total in-kind contributions this period (page 6, line 18)  |            |
| Line 7: Total (all) outstanding liabilities (page 7, line 19)      |            |
| Line 8: Total out-of-pocket expenses this period (page 8, line 22) |            |
| Line 9: Name of bank(s) 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, 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: Paula MacDonald (Treasurer's signature) Date: 5/12/2024

**FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)**

**Candidate with 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 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 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Jim MacDonald (Candidate's signature) Date: 5/12/2024

## SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

| Date Received | Name and Residential Address<br>(alphabetical listing required)            | Amount | Occupation & Employer<br>(for contributions of \$200 or more) |
|---------------|--|--------|---|
| 4/7/2024      | Friends of Mike Rush<br>PO Box 320275<br>West Roxbury, MA 02132            | 100    |   |
| 4/7/2024      | Fayez Nassif<br>20 Bridle Path, Westwood, MA<br>02090                      | 1000   | Car dealer  |
| 4/7/2024      | Drew Smith<br>96 Dix St<br>Dorchester, MA 02122                            | 260    | Treasurer U Michigan  |
| 4/10/2024     | United Steelworkers of America<br>PO Bos 634<br>Dedham, MA 02027           | 250.   | PAC   |
| 4/10/2024     | Professional Firefighters of MA<br>2 Center Plaza, 4 M<br>Boston, MA 02128 | 500.   | PAC   |
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