

Ella
MacLaren



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY CLERK'S OFFICE
METHUEN, MA

Dec. 1st
2025 NOV 31 AM 9:15

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/18/25 Ending Date: _____

Type of Report: (Check one)

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

Ella MacLaren
Candidate Full Name (if applicable)
Central District City Councilor
Office Sought and District
20 Windsor St Methuen, MA
Residential Address
E-mail: ellamaclaren@gmail.com
Phone #: 978-697-0413

Committee to Elect Ella MacLaren
Committee Name
Christina MacLaren
Name of Committee Treasurer
20 Windsor St. Methuen, MA
Committee Mailing Address
E-mail: maclarene11@gmail.com
Phone #: 978-697-4055

SUMMARY BALANCE INFORMATION:

| | |
|--|-----------------------|
| Line 1: Ending Balance from previous report | <u>\$787.38</u> |
| Line 2: Total receipts this period (page 3, line 12) | <u>\$200.00</u> |
| Line 3: Subtotal (line 1 plus line 2) | <u>\$987.38</u> |
| Line 4: Total expenditures this period (page 5, line 15) | <u>\$671.80</u> |
| Line 5: Ending Balance (line 3 minus line 4) | <u>\$315.58</u> |
| Line 6: Total in-kind contributions this period (page 6, line 18) | <u>_____</u> |
| Line 7: Total (all) outstanding liabilities (page 7, line 19) | <u>_____</u> |
| Line 8: Total out-of-pocket expenses this period (page 8, line 22) | <u>_____</u> |
| Line 9: Name of bank(s) used: | <u>Rockland Trust</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: _____

(Treasurer's signature)

Date: 10/29/25

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: _____

(Candidate's signature)

Date: 10/29/25

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

| Date Paid | To Whom Paid (alphabetical listing) | Address | Purpose of Expenditure | Amount |
|-----------|--|---|------------------------|----------|
| 10/20/25 | | | | |
| 10/28/25 | Staples | 73 Turnpike St North Andover, MA | Envelopes | \$31.84 |
| 10/28/25 | Staples | 167 S. Broadway Suite 5 Salem, NH | Labels | \$12.99 |
| 10/20/25 | Thrift Co Printing | 56 Pulaski St Peabody, MA | Lawn signs | \$350.00 |
| 10/27/25 | Thrift Co Printing | 56 Pulaski St Peabody, MA | Lawn Signs | \$42.97 |
| 10/28/25 | USPS | 51 S. Broadway Salem, NH | Stamps | \$234.00 |
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Total : \$671.80

Enter expenditure totals on Page 5

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.*

[illegible]

Total: \$200.00

Enter receipt totals on Page 3