



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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CITY OF MARLBOROUGH

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File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/2023 Ending Date: 10/20/2023

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Mark A. Oram
Candidate Full Name (if applicable)
Councilor At Large
Office Sought and District
108 Upland Road Marlborough
Residential Address
Telephone Number (optional):

Oram Campaign Committee
Committee Name
Mark E. Flynn's
Name of Committee Treasurer
61 Woodland Road Helden MA 01502
Committee Mailing Address
Telephone Number (optional): 774.364.2176

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>44.85</u>
Line 2: Total receipts this period	<u>57.29</u>
Line 3: Subtotal (line 1 plus line 2)	<u>102.14</u>
Line 4: Total expenditures this period	<u>52.29</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>49.85</u>
Line 6: Total in-kind contributions this period	<u>0</u>
Line 7: Total (all) outstanding liabilities	<u>13,165.04</u>
Line 8: Name of bank(s) used:	<u>St. Mary's Credit Union</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: [Signature] (Treasurer's signature) Date: 10/28/23

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: 10-30-23

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/22/23			
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)		57.29	
Line 11: TOTAL RECEIPTS IN THE PERIOD		57.29	← 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.

