



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 1 2023 Ending Date: Oct. 29 2023

Type of Report: (Check one)

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

RYAN MELVILLE
Candidate Full Name (if applicable)

COUNCILOR AT LARGE
Office Sought and District

30 HANCOCK ST PEABODY MA 01960
Residential Address

E-mail: MELVILLE.RYAN@YAHOO.COM

Phone # (optional): _____

COMMITTEE TO ELECT RYAN MELVILLE
Committee Name

JOHN GANNON
Name of Committee Treasurer

27 BARTHOLOMEW TERR PEABODY MA 01960
Committee Mailing Address

E-mail: JACK1958@COMCAST.NET

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0.00
Line 2: Total receipts this period (page 3, line 11)	\$2,800.000
Line 3: Subtotal (line 1 plus line 2)	\$2,800.00
Line 4: Total expenditures this period (page 5, line 14)	\$2,781.58
Line 5: Ending Balance (line 3 minus line 4)	\$18.42
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	\$5,120.00
Line 8: Name of bank(s) used:	SANTANDER BANK

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: John J Gannon (Treasurer's signature) Date: October 29, 2023

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: Ryan Melville (Candidate's signature) Date: 10/29/23

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)
9/7/2023	THOMAS.WYNN 4 COLUMBIA BLVD PEABODY MA 01960	\$100.00	RETIRED
10/4/2023	JOHN SACRAMONE 15 BRENTWOOD DR PEABODY MA 01960	\$100.00	RETIRED
10/20/2023	RYAN MELVILLE	\$2,600.00	COMMONWEALTH OF MA DEPUTY DIRECTOR ABCC
Line 9: Total Receipts over \$50 (or listed above)		\$2,800.00	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$2,800.00	← 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 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
FEB 2, 2017	RYAN MELVILLE	30 HANCOCK ST PEABODY MA 01960		\$20
MAR 6, 2017	RYAN MELVILLE	30 HANCOCK ST PEABODY MA 01960		\$200
OCT 14, 2021	RYAN MELVILLE	30 HANCOCK ST PEABODY MA 01960		\$2000
OCT, 19, 2021	RYAN MELVILLE	30 HANCOCK ST PEABODY MA 01960		\$300
10/20/2023	RYAN MELVILLE	30 HANCOCK ST PEABODY MA 0196		\$2600
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	5120.00