Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report
Municipal Form

Office of Campaign and Political Finance

BOARD OF ELECTION COMMISSIONERS
2022 JAN 13 PM 1:02
REVERE MA

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-21 Ending Date: 12-31-21

Type of Report: (Check one)

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

Arthur F. Guinasso
Candidate Full Name (if applicable)

Councillor Ward 3
Office Sought and District

510 Revere Beach Blvd. Apt. 103
Residential Address

E-mail: AGuinassorevere@HotMail.Com

Phone # (optional): 781-284-3339

Comm to Re-Elect Arthur Guinasso
Committee Name

Karin Atsales
Name of Committee Treasurer

510 Revere Beach Blvd. Apt. 103
Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	9,450.59
Line 2: Total receipts this period (page 3, line 11)	3,000.00
Line 3: Subtotal (line 1 plus line 2)	12,450.59
Line 4: Total expenditures this period (page 5, line 14)	5,149.90
Line 5: Ending Balance (line 3 minus line 4)	7,300.69
Line 6: Total in-kind contributions this period (page 6)	-0-
Line 7: Total (all) outstanding liabilities (page 7)	-0-
Line 8: Name of bank(s) used:	Bank of America

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: Karin Atsales (Treasurer's signature) Date: 1/13/22

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: Arthur F. Guinasso (Candidate's signature) Date: 1/13/22

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)
	"See Attached		
	Schedule A"		

Line 9: Total Receipts over $50 (or listed above)	3,000
Line 10: Total Receipts $50 and under* (not listed above)	
Line 11: TOTAL RECEIPTS IN THE PERIOD	3,000 ← 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

Date	From Whom Received	Residential Address	Amount
8/5/2021	Stephen R. Caruso Deveolper	3 Tonika Ct Peabody, MA 01960	500.00
8/5/2021	Diane M Denty Global	9 Clark Rd Wellesley Hills MA 02481-6736	500.00
6/18/2021	MA & No. New England Laborers District Council	7 Laborers Way Hopkinton, MA 01748-2684	500.00
8/5/2021	Andrew P Slifka Global	24 Union Park Apt 2 Boston, MA 02118-3730	500.00
8/5/2021	Richard B Slifka Global	PO Box 9161 Waltham, MA 02454	500.00
10/22/2021	Andrew J Sica Deveolper	11 Wildwood Rd. Middleton, MA 01949	250.00
10/22/2021	Daniel V. Sica Deveolper	19 James Millen Rd. North Reading MA 01864.	250.00
	Line 9:	Total receipts in excess of $50.....	3,000.00
	Line 10:	Total receipts $50 and under.....	
	Line 11:	TOTAL RECEIPTS IN THE PERIOD	3,000.00

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
	"See Attached			
	Schedule B"			

Line 12: Total Expenditures over $50 (or listed above)	5,122.90
Line 13: Total Expenditures $50 and under* (not listed above)	27.00
Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD**	5,149.90

* 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 B: EXPENDITURES

Date Paid	To Whom Paid	Address	Purpose of Expenditure	Amount
2/3/2021	Apple MarketStreet	1220 Market St. Lynnfield, MA 01940	Tablet & Keyboard	954.13
4/6/2021	Advocate Newspapers, Inc.	P.O. Box 490407 Everett, MA 02149	Ad 4/2/21	50.00
5/10/2021	Advocate Newspapers, Inc.	P.O. Box 490407 Everett, MA 02149	Ad 5/7/21	50.00
6/3/2021	Advocate Newspapers, Inc.	P.O. Box 490407 Everett, MA 02149	Ad 5/28/21	50.00
6/14/2021	Advocate Newspapers, Inc.	P.O. Box 490407 Everett, MA 02149	Ad 6/11/21	50.00
7/6/2021	Advocate Newspapers, Inc.	P.O. Box 490407 Everett, MA 02149	Ad 7/2/21	50.00
10/12/2021	Advocate Newspapers, Inc.	P.O. Box 490407 Everett, MA 02149	Ad 10/8/21	50.00
12/6/2021	Companions Restaurant	488 Broadway Revere, MA 02151	Gatering for Campaign Workers	56.46
11/16/2021	Arthur F. Guinasso	2 Martin St. Revere, MA 02151	Repay Loan Made To Comm	2,000.00
11/17/2021	Home For Little Wanderers	160 Lantern Road Revere, MA 02151	Donation	25.00
6/4/2021	Independent Newspaper Group	385 Broadway Revere, MA 02151	Ad 5/26/21	65.00
6/14/2021	Independent Newspaper Group	385 Broadway Revere, MA 02151	Ad 6/9/21	75.00
6/30/2021	Independent Newspaper Group	385 Broadway Revere, MA 02151	Ad 3/31/21	65.00
7/8/2021	Independent Newspaper Group	385 Broadway Revere, MA 02151	Ad 6/30/21	75.00
7/8/2021	Independent Newspaper Group	385 Broadway Revere, MA 02151	Ad 6/30/21	50.00
11/17/2021	Independent Newspaper Group	385 Broadway Revere, MA 02151	Ad 11/10/21	65.00
12/2/2021	Independent Newspaper Group	385 Broadway Revere, MA 02151	Ad 11/24/21	65.00
12/23/2021	Independent Newspaper Group	385 Broadway Revere, MA 02151	Ad 12/1/2021	65.00
8/11/2021	Kinship Floral	Chelsea, MA	Floral Arraigment	116.25
12/16/2021	Kinship Floral	Chelsea, MA	Christmas Arrangement-Argenzios	81.06
11/16/2021	Knights of Columbus	339 Park Ave. Revere, MA 02151	Donation/Heat	100.00
12/5/2021	Knights of Columbus	339 Park Ave. Revere, MA 02151	Dues 2022	50.00
11/23/2021	Market Basket	275 Squire Rd Revere, MA 02151	Gift Certificates	200.00
7/8/2021	Murrays	Broadway Revere, MA 02151	Gift Certificate	100.00
5/29/2021	Revere Beautification Comm.	P.O. Box 166 Revere, MA 02151	Barrel Ad Program	200.00
8/12/2021	RHS Field Hockey Parents	14 Irving St. Revere, MA 02151	Donation	25.00
3/1/2021	RHS Softball Parents Club	37 Belle Isle Ave. Revere, MA 02151	Donation	25.00
6/16/2021	RMBGRC	108 Beach St. Revere, MA 02151	Sponsor Bocce Team	200.00
2/6/2021	USPS	151 VFW Pkwy Revere, MA 02151	Stamps	55.00
8/9/2021	USPS	151 VFW Pkwy Revere, MA 02151	Stamps	110.00
	Line 12:	**Expenditures over $50**		**5,122.90**
	Line 13:	**Expenditures $50 and under**		**27.00**
	Line 14:	**TOTAL EXPENDITURES**		**5,149.90**

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

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)** —0—