



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

BOARD OF ELECTION COMMISSIONERS

16 JAN 19 AM 11:06

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10.17.15 Ending Date: REVERE. 31.15

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

JOHN F. POWERS  
Candidate Full Name (if applicable)  
WARD FIVE CITY COUNCILOR  
Office Sought and District  
46 NEPONSET, REVERE, MA 02151  
Residential Address  
Telephone Number (optional): 781-888-5665

COMMITTEE TO ELECT JOHN F. POWERS  
Committee Name  
CHARLENE F. THEODORE  
Name of Committee Treasurer  
46 NEPONSET ST. REVERE, MA 02151  
Committee Mailing Address  
Telephone Number (optional):

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending Balance from previous report	<u>33,082.44</u>
Line 2: Total receipts this period (page 3, line 11)	<u>551.09</u>
Line 3: Subtotal (line 1 plus line 2)	<u>33,633.53</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>1,084.34</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>32,549.19</u>
Line 6: Total in-kind contributions this period (page 6)	<u>-0-</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>-0-</u>
Line 8: Name of bank(s) used:	<u>PEOPLES UNITED BANK - REVERE, MA</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: Charlene F. Theodore (Treasurer's signature) Date: 1/18/16

**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: John F. Powers (Candidate's signature) Date: 1-18-2016



## 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)
11-9-2015	RALPH CARUSO, JR. 320 CHARGER ST REVERE MA 02151	300.00	OWNER - CARUSO CONSTRUCTION 320 CHARGER ST REVERE

Line 9: Total Receipts over \$50 (or listed above)	300.00
Line 10: Total Receipts \$50 and under* (not listed above)	251.09
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>	<b>551.09</b>

INCLUDES \$1.09 BANK INTEREST

← 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 B Expenditures

Date	To Whom Paid	Address	Purpose of Expenditure	Amount
12-1 --2015	Birchcraft Studios	10 Railroad St., Abington, MA 02351	Greeting Cards	185.94
11-12-2015	Revere Advovate	573 Broadway, Everett, MA 02149	Advertising	180.00
12-22-2015	Revere Advocate	573 Broadway, Everett, MA 02149	Advertising	300.00
12-27-2015	Revere Independent	385 Broadway, Revere, MA 02151	Advertising	75.00
12-28-2015	Revere Journal	385 Broadway, Revere, MA 02151	Advertising	265.00
12-19-2015	U.S. Postal Service	VFW Parkway, Revere, MA 02151	Postage Stamps	78.40
<b>Total</b>				<b>1084.34</b>



## 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)	10 ✓
			Line 16: In-Kind Contributions \$50 & under (not listed above)	10 ✓
Enter on page 1, line 6 →			<b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>	10 ✓

\* 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 →	<b>Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)</b>			/ 0 /



**Schedule E  
Municipal Form  
Disclosure of Assets Statement  
Office of Campaign and Political Finance**

Commonwealth  
of Massachusetts

File with: City or Town Clerk or Election Commission

This form should be filed by all candidates and committees with each year end and each dissolution report.

Committee Name: COMMITTEE TO ELECT JOHN F. POWERS Date of report: 1-14-2016

**All candidates and committees must fill in Part A or Part B.**

**Part A:**  
 No assets\* were acquired or disposed of by this candidate/committee during the period covered by this statement.

**Part B:**  
Assets acquired: List all assets acquired since the committee last filed this statement. If this is the first Schedule E you have filed, list all assets.

Asset <small>Include year, model or other identifying information, if applicable.</small>	Date Acquired	Present Location	Manner Acquired	Cost/Value

Assets disposed of: List all assets sold, traded or transferred during the reporting period covered by this statement.

Asset <small>Include year, model or other identifying information, if applicable.</small>	Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	Disposition Value <small>Attach statement of how value is determined.</small>

Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.

\*An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.

Signed under the penalties of perjury:

Signed under the penalties of perjury:

John F. Powers 1-14-2016  
Candidate signature Date

\_\_\_\_\_  
Treasurer signature Date

Attach additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.