

### Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance COMMISSIONERS

17 JAN 23 AM 8: 16

of Massachusetts	File with: City or Town Clerk or Election Commission					
Fill in Reporting Period dates: Beginning Date: L. ( 6 Ending Date: 13 16						
Type of Report: (Check one)  8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution						
Robert J. HAAS Tr  Candidate Full Name (if applicable)  Councillor AT LARGE  Office Sought and District	Comm To Elect Robert F. HAAS AF Committee Name  TUANTA HAAS  Name of Committee Treasurer					
350 Revere Beach Blvd 9-10L Residential Address	SAME					
Residential Address  E-mail: RHAAS THE COMCAST, NCT	Committee Mailing Address  E-mail:   Sam					
Phone # (optional): 781-284-5039	Phone # (optional): SAMC					
SUMMARY BALANCE INFORMATION:						
Line 1: Ending Balance from previous report  25,426.06  Line 2: Total receipts this period (page 3, line 11)  500.00						
Line 3: Subtotal (line 1 plus line 2)	25926.06					
Line 4: Total expenditures this period (page 5, line	ne 14) <i>4.488.98</i>					
Line 5: Ending Balance (line 3 minus line 4)	19, 421, 08					
Line 6: Total in-kind contributions this period (pa	age 6)					
Line 7: Total (all) outstanding liabilities (page 7)	)					
Line 8: Name of bank(s) used: 7 D BANK 411 Broadway, Trevere MA 6257						
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:    Date:						
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 se  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority of on behalf of thi	he best of my knowledge and belief, a true and complete statement of all campaign ats, in-kind contributions and liabilities for this reporting period and represents the his committee in accordance with the requirements of M.G.L. c. 55.  Date: 1/20//7					
Sind and the modeline of mariners of the North Margarith	(Candidate's signature)  Date:					

### 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.)

report un receipio.	Please include your committee name and a pa		Occupation & Employer
Date Received	Name and Residential Address (alphabetical listing required)	Amount	(for contributions of \$200 or more)
Date Received		Amount	(101 CONCIDENCE OF \$200 OF MOTE)
2/10/14	JAMES CIPOLETTA	500.00	LAWYER
		7	
Line 9: Total Rece	ipts over \$50 (or listed above)	500.00	
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL 1	RECEIPTS IN THE PERIOD	500.00	Enter on page 1, line 2

<sup>\*</sup> 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 Received** 

Name and Residential Address

Amount

Occupation/Employer

2/10/16

James Cipoletta, 385 Broadway,

\$500.00

Lawyer

Ste. 307, Revere, MA 02151

\$500.00

Total Receipts over \$50:

\$0.00

Total Receipts \$50 and Under:

\$500.00

Total Receipts in the Period:

### 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
Date Faid	(aiphabetical listing)	1100100		
		*		
	3			
				of the Park
				7 11 11
		Line 12: Total Expenditures or	ver \$50 (or listed above)	4751.8
				I a um
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	174%
			TURES IN THE PERIOD	6498.9

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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# SCHEDULE B: EXPENDITURES

Date Paid	To Whom Paid	Address	Purpose	Amount
4/16/16	AC Whelan School PTA	107 Newhall St., Revere, MA 02151	Donation (shirts)	\$100.00
6/22/16	The Advocate Newspaper	P.O. Box 490407, Everett, MA 02149	Advertisement	\$100.00
11/8/16	The Advocate Newspaper	P.O. Box 490407, Everett, MA 02149	Advertisement	\$70.00
12/28/16	The Advocate Newspaper	P.O. Box 490407, Everett, MA 02149	Advertisement	\$75.00
4/5/16	Beachmont School PTO	15 Everett St., Revere, MA 02151	Donation (shirts)	\$100.00
9/15/16	Best Buy	1201 Broadway, Saugus, MA 01906	Senior Center Donation (Sound system)	\$126.21
2/21/16	Boston Bruins Foundation	300 Broadway, Revere, MA 02151	Donation	\$125.00
8/11/16	Comm. to Elect Brian Arrigo	131 Savage St., Revere, MA 02151	Donation (cruise)	\$100.00
5/5/16	Garfield School PTA	176 Garfield Ave., Revere, MA 02151	Donation (shirts)	\$100.00
11/29/16	The Hundred Club	17 Gloucester St., Boston, MA 02115	Dues	\$250.00
2/2/16	ING, LLC	385 Broadway, Revere, MA 02151	Advertisement	\$75.00
2/24/16	ING, LLC	385 Broadway, Revere, MA 02151	Advertisement	\$544.60
7/8/16	ING, LLC	385 Broadway, Revere, MA 02151	Advertisement	\$75.00
7/25/16	ING, LLC	385 Broadway, Revere, MA 02151	Advertisement	\$75.00
11/1/16	ING, LLC	385 Broadway, Revere, MA 02151	Advertisement	\$75.00
11/21/16	ING, LLC	385 Broadway, Revere, MA 02151	Advertisement	\$150.00
4/16/16	Lincoln School PTA	68 Tuckerman St., Revere, MA 02151	Donation (shirts)	\$100.00
8/20/16	MA Broadcasters Hall of Fame	50 Braintree Hill Park, Ste. 308, Braintree, MA 02184 Donation	Donation	\$150.00

8/24/16	Moose International	P.O. Box 88065 Chicago, IL 60680-1065	Dues	\$60.00
2/2/16	Paul Revere School	395 Revere St., Revere, MA 02151	Donation	\$250.00
11/4/16	Postmaster Boston	Broadway, Revere, MA 02151	Postage	\$196.00
5/14/16	Revere Beautification Comm.	P.O. Box 166, Revere, MA 02151	Sponsor (Barrels)	\$200.00
6/27/16	Revere Beach Partnership	150 Revere St., Revere, MA 02151	Donation	\$125.00
3/23/16	Revere Chamber of Commerce	P.O. Box 63, Revere, MA 02151	Installation	\$55.00
4/18/16	Revere Chamber of Commerce	108 Beach St., Revere, MA 02151	Donation	\$150.00
1/13/16	Revere High School	101 School St., Revere, MA 02151	Donation	\$100.00
8/5/16	RHS Golf	101 School St., Revere, MA 02151	Donation	\$125.00
9/28/16	RHS Hockey	19 Orchard St., Revere, MA 02151	Sponsor	\$100.00
4/16/16	RHS Track and Field	305 Vane St., Revere, MA 02151	Donation (shirts)	\$100.00
12/13/16	RSHP	108 Beach St., Revere, MA 02151	Donation	\$250.00
12/15/16	ROCA	101 Park Ave., Chelsea, MA 02150	Donation	\$100.00
4/4/16	Rumney Marsh Academy	140 American Legion Highway, Revere, MA 02151	Donation (shirts)	\$100.00
2/6/16	RYBS	33 Loomis St., Revere, MA 02151	Team Sponsor	\$250.00
5/14/16	Silvio Cella Family Foundation	P.O. Box 1074, Lynnfield, MA 01940	Hole sponsor	\$100.00
10/15/16	Step 4 Cancer	14 Proctor Ave., Revere, MA 02151	Walk	\$100.00

Total Expenditures over \$50:

\$4,751.81

Total Expenditures \$50 and under: \$1,747.17

Total Expenditures in this period:

\$6, 498.98

### 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	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	0

<sup>\*</sup> 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.

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### 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
v.				
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	8