

Form CPF M 102: Campaign Finance Report

Municipal Form BOARD OF ELECTION
Office of Campaign and Political Finance ISSIONERS

2020 JAN 13 PM 5: 23
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10.19.19 Ending Date: RE. MA - 31.19								
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after election year-end report diss	olution							
TOANNE MCKENNA Candidate Full Name (if applicable) WARD ONE COUNCILLOR Office Sought and District Residential Address E-mail: JMCKENNA Phone # (optional):								
SUMMARY BALANCE INFORMATION:								
Line 1: Ending Balance from previous report 23, 105.50								
Line 2: Total receipts this period (page 3, line 11)								
Line 3: Subtotal (line 1 plus line 2)								
Line 4: Total expenditures this period (page 5, line 14)								
Line 5: Ending Balance (line 3 minus line 4) 26,824.14								
Line 6: Total in-kind contributions this period (page 6)								
Line 7: Total (all) outstanding liabilities (page 7)								
Line 8: Name of bank(s) used: Citizens Bank-Broadway Perch								
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 periury: (Treasurer's signature) Date:								
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 call 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 incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.	mpaign finance contributions,							
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 ca finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represe 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. Date:	mpaign nts the							
Signed under the penalties of perjury: (Candidate's signature)								

SCHEDULE A: RECEIPTS (SEE ATTACHE

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.)

	lease 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	(aiphiabetical listing required)	Amount	(101 contributions of \$200 of factor)
-			
Line 9: Total Rece	ipts over \$50 (or listed above)		
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		Enter on page 1, line 2 Id include only those receipts not itemized above.

^{*} 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 (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Recei	ipts \$50 and under* (not listed above)		
The second secon	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2 d include only those receipts not itemized above.

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

COMMITTEE TO ELECT JOANNE MC KENNA REVENUE JAN- DEC 2019

	OTEC	CIES	eloper	- Complete	in pioyees				ary		loper	oper		ober		
	OCCUPATION/NOTES		300.00 Donation-Real Estate Developer	200 On Donation City of Poyors Employee	Condition only of Nevele		on no nonation - retired		1,000.00 Donation- campaign secretary	Donation comparison	1,000.00 Dollation - callipaign - developer	1,000.00 Donation- campaign- developer		1,000.00 Lonation - campaign - developer		
	Donation		300.00	200 00	0000	000	20.00	1,000,00	1,000.00	1 000 00	00.000	1,000.00	4 000 00	1,000.00		4.550.00
	Zip			02151		02151	10170			02149	00700	02120	02180	02 100		
	State Zip	080	ZIA.	MA		MA		MA	L SIAI	MA		MA	MA			
	City	Packet.	vayial id	Revere		Rayora	0000	Chelsea	5	Everett	Ctonohom	Storierialli	Stoneham	Colorellan		
	Street	10 Apple Tree Lane	- 1	100 Broadway	49 Dolphin Ave- G1-I iston	Towers		8 Chester Ave Apt 3		45 Highland Ave	224 Park Street, Hoit AS	STATE OF STA	7 Rose Lane			
	Last	Macdowell Jr		Association- Local 400 Broadway	7	Walsh		Vega		Kane	Martino		Walsh			
Finet	FIRST	Roy Macdowell Jr	Povere Fire Fighters	vevere rije rigniers		Tim		Elena	Change	Citaliyee	Carol		Frank			
Date	Date	10/29/19	10/29/19	T		10/31/19	40/47/40	8111171	12/17/10		12/17/19	40/47/40	Ì	THE PROPERTY OF THE PARTY OF TH	TOTAL	

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

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		Line 12: Total Expenditures	over \$50 (or listed above)	
		Line 13: Total Expenditures \$	650 and under* (not listed above)	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 4

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	(manual mount)	Traditios .	Turpose of Expenditure	Amount
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and u		
If you have itemin		Line 14: TOTAL EXPENDITU	ORES IN THE PERIOD ould include only those expenditures	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

COMMITTE TO ELECT JOANNE MCKENNA EXPENSES

Date Paid	NAME	Street	City	State	Purpose	Amount
11/5/19	Luigi Pizza	Winthrop Ave	Веуеге		food for noll workers	200
44/6/40						70.70
BL/C/II	Demainos Restaurant	14 Malden Street	Revere	MA	dinner committee members election night	324.78
11/5/19	Demainos Restaurant	14 Malden Street	Revere	MA	dinner committee members election night	58 13
11/14/19	Home For Little Wanderers	160 Lantern Road	Revere	MA	tovs for Christmas- CK#284	35.00
11/22/19	RHS Feed A Student	101 School Street	Ravere	MA	food for Thankenisian CK#29E	20.00
11/25/19	US Postal Service		Revere	MA	nood for High Kagiwing- CrA+203	90.00
12/7/19	City of Revere	281 Broadway	Revere	MA	Santa's Christmas Walk - CK#286	26.02
12/10/19	Harbor Cove		Chelsea	MA	card-clothes for homeless shelters	50.00
12/16/19	RHS Foootball Parents Club	101 School Street	Revere	MA	CK#287	200.00
12/19/19	St Jude Children's Hospital	PO Box 50	Memohis	Z	CK#288	25.00
12/19/19	Stop & Shop	Winthrop Ave	Revere	MA	Card -flowers for Rosetti Senior Cewinter Baffla	6.40
TOTAL		皇子兴 唐在秦帝军军军军军事,曹宗下				831.36

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
	Salts Salts	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 CO	ONTRIBUTIONS	

^{*} 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
			201.	
		Line 18: TOTAL OUTSTAND		