

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report

Municipal Form

ELECTION OMMISSIONERS

Date:

Office of Campaign and Political Finance COMMISSIONERS

Beginning Date: **Ending Date:** Fill in Reporting Period dates: Type of Report: (Check one) dissolution year-end report 8th day preceding election 30 day after election 8th day preceding preliminary Office Sought and District rennal Rova Phone # (optional): Phone # (optional): **SUMMARY BALANCE INFORMATION:** Line 1: Ending Balance from previous report 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) 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: 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: 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

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 mittee name and a nage number on each nage

port all receipts. P	Name and Residential Address	A	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	
	SEE AT	ACH N	PENT
		1	
	eipts over \$50 (or listed above) ceipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

FORM CPF M 102: Campaign Finance Report- Committee to Elect Joanne McKenna

Start Date: 01-01-2020 End Date: 12-31-2020

Date Received Name & Residential Address Amount Occupation & Employer			
	esidential Address	Amount	Occupation & Employer
John Ford			
3 Seal Harbor Road	oor Road		
2/6/20 Winthrop, MA	MA	\$500.00	\$500.00 Owner, Top Auto
Robert Ine	Robert Inello Operating Account		
200 Lynnway	/ay		
3/3/20 Revere, MA	А	\$250.00	\$250.00 Owner, electrician
TOTAL		\$750.00	

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)		
	ipts \$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 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
Date I alu	(aiphabetical fisting)	7 Tutal ess	Taipose of Emperior	
				18 To 18
				4.7
			An and the second	
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	
		Line 12. Total Even anditume 05	and under* (not listed above)	
		Line 13: Total Expenditures \$5	and under (not fisted above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	LIDEC IN THE DEDIOD	

^{*} 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 (continued)

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
				100
				4
			(2)	
4				
7.7				
		Line 12: Expenditures over \$50	0 (or listed above)	
		T: 12 F 1: 050 1	dowk (mot listed ab)	
		Line 13: Expenditures \$50 and		
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	
If you have iter	mized expanditures of \$50 and unde	r, include them in line 12. Line 13 s	should include only those expenditure	es not itemized

^{*} 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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Date Paid To Whom Paid 1/29/20 US Postal Servi 2/5/20 Torrettas Baker 2/11/20 Revere Journal				
1/29/20 UI 2/5/20 Tr 2/11/20 R	To Whom Paid	Address	Purpose of Expense	Amount
1/29/20 US 2/5/20 Tc 2/11/20 R				1
2/5/20 Tc	1/29/20 US Postal Services		card	\$55.00
2/5/20 TG 2/11/20 R		Ave		1
2/11/20 R	2/5/20 Torrettas Bakery		Community Meeting	\$17.21
Z/11/20 Kg	-	385 Broadway #105	Advantisament Community Moorting	\$735.00
	evere Journal		מוויים של היים היים היים היים היים היים היים היי	
2/11/20 A	2/11/20 Airport Diner	To Furiong Ave Revere, MA	Breakfast Meeting	\$56.55
		Ave		
2/28/20 Rt	2/28/20 Revere High School Softball Parents Club	Revere, MA	support for athletic teams	\$50.00
		ıtion Ave	councit for athletic frame	\$25,00
2/28/20 K	2/28/20 Revere High School Lacrosse Parents Club		Support for atment reams	25.00
3/10/20 D	3/10/20 Darlene Janis	29 Wentworth Road Revere, MA	Gift Card for Financial Services Rendered	\$109.90
				¢16E 00
3/19/20 0	3/19/20 US Postal Services		stamps	2103.00
4/4/20 Fi	4/4/20 Eiret Congregational Church	230 Beach street Revere. MA	Food Pantry	\$100.00
107/1				
4/23/20 R	4/23/20 Revere High School Class of 2020	TOT School Street Revere, MA	Go Fund Me page to support gradutation	\$100.00
		PO Box 490407		
5/7/20 A	5/7/20 Advocate Newspaper	149	Advertisement	\$100.00
		PO Box 490407		
5/28/20 A	5/28/20 Advocate Newspaper	Everett, MA 02149	Advertisement	\$55.00
6/3/20 C	6/3/20 Cory Abrams Children Education	Revere, MA	Go Fund Me page support	\$100.00
		662 Withrop Ave		60 63
6/28/20 T	6/28/20 Torrettas Bakery	Revere, MA	Coffee for constinents	39.05
6/11/20R	6/11/20 Revere Youth Baseball & Softball	640 Washington Ave Revere, MA	Team sponsorship	\$300.00
		Beach Pkwy	1	
6/15/20 F	6/15/20 Home Depot	Chelsea, MA	Flowers for Beachmont Square	\$70.51
		PO Box 166	i de constante de la constante	00 0005
8/8/20 F	8/8/20 Revere Beautification Committee	Kevere, MA	Darrei sponsorsnip	2500.00
8/17/20IR	8/17/20 Revere Journal	385 Broadway #105 Revere, MA 02151	Advertisement	\$100.00
		100 Revere Beach Pkwy		
8/29/20	8/29/20 Home Depot	Chelsea, MA	Flowers for Beachmont Square	\$84.83
		PO Box 490407		
9/12/20	9/12/20 Advocate Newspaper	Everett, MA 02149	Advertisement	\$50.00
		5 Michaels Mall		,
9/18/20	9/18/20 US Postal Services	wintrhop, MA	stamps for mailing to community	\$165.00
11/17/20	11/17/20 Bevere Advocate Newsmaner	573 Broadway Everett MA 02149	Advertisement	\$50.00
11/11/701	nevel e Auvocate inewspapel	באבופנו, ואוט סבידים		¢2 109 £2

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 $6 \rightarrow$	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