

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance MMISSIONERS

2021 OCT 25 PM 4: 26
File with: City or Town Clerk or Election Commission Fill in Reporting Period dates: Beginning Date: **Ending Date:** 10/15/2021 01/01/2021 Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution Manuel Carrero, Jr The Carrero Committee Candidate Full Name (if applicable) Committee Name City Councilor - Revere Ward 2 Maria Patricia Patino Balbin Office Sought and District Name of Committee Treasurer 17 Waverly Ave. Revere, MA 02151 17 Waverly Ave. Revere, MA 02151 Residential Address Committee Mailing Address carrerom333@gmail.com votecarrero@gmail.com 8572499874 7819514442 Phone # (optional): Phone # (optional): SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report \$0 Line 2: Total receipts this period (page 3, line 11) \$5,901 Line 3: Subtotal (line 1 plus line 2) \$5,901 Line 4: Total expenditures this period (page 5, line 14) \$2,649.90 **Line 5:** Ending Balance (line 3 minus line 4) **Line 6:** Total in-kind contributions this period (page 6) \$475.23 Line 7: Total (all) outstanding liabilities (page 7) \$0 Line 8: Name of bank(s) used: Santander Bank N. A. 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. Date: 10/25/2021 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. 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, expenditares, 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. Date: 10/25/2021 Signed under the penalties of perjury: _(Candidate's signature)

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.)

D.4. P	Name and Residential Address	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	
	Brian Riccio PO Box 3287		Chauffer OHS Transportation
	Beverly, MA 01915		
07/26/2021		\$100	
	Brian Riccio		Chauffer
	PO Box 3287 Beverly, MA 01915		OHS Transportation
08/06/2021	Beveriy, Fin 01313	\$100	
	Colley McCay		Financial Analyst
	Colby McCay 11 Sawyer Ave		Electric Insurance Company
07/12/2021	Atkinson, NH 03811	\$500	
07/12/2021		\$300	
SQUENTA AND PROCESSOR OF SQUENCES STATE OF CHARGE STATE OF CHA	Elijah Bracero 372 Lynnfield St.	And and a second	
	Peabody, MA 01960		
07/08/2021		\$100	
	Fernelly Yepes	promotes and decision on the end of the Anni Anni Anni Anni Anni Anni Anni Ann	
	101 Charger St. Revere, MA 02151	Antonia de de constituir de de constituir de de constituir	6
10/12/2021		\$100	
	Gladys E. Munoz		
	284 Mountain Ave.		
10/13/2021	Revere, MA 02151	\$100	The Administration of the Control of
10/13/2021			IT Manager
	Johnny Perez 73 Augustus St.		IT Manager Carylon Corporation
	Revere, MA 02151	+250	The state of the s
07/10/2021		\$250	
	Johnny Perez		IT Manager Carylon Corporation
	73 Augustus St. Revere, MA 02151		
10/06/2021		\$250	
	Juan Diego Jaramillo		Mayoral Aide
	37 Centennial Ave. Apt. 2 Revere, MA 02151		City of Revere
recurring \$50 each		\$200	
	Katya Perez	programme or a major of the contract of the co	
	73 Augustus St.		De la constanta de la constant
10/06/2021	Revere, MA 02151	\$100	
TU/UU/ZUZI			
	Laila Pietri 525 Beach St Apt. 301	diameter in the second	The second secon
	Revere, MA 02151	1100	
10/06/2021		\$100	
	Madeleine Steczynski 103 Webster Street		
	East Boston, MA 02128	Accommon to the control of the contr	
08/26/2021		\$100	
Line 9: Total Rece	eipts over \$50 (or listed above)	\$4,900	
r ' 10. Tr 1 P	sints 650 and and ank (not listed shows)		
Line 10: Total Rec	eipts \$50 and under* (not listed above)	\$1,001	
T : 11. TOTAT	DECEIPTS IN THE DEDIOD		F
Line II: TOTAL	RECEIPTS IN THE PERIOD	\$5,901	← 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 (continued)

n . n	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
	Manuel A. Carrero 17 Waverly Ave.	The state of the s	Operations Engineer Raytheon Technologies
2	Revere, MA 02151		Raytheon rechnologies
10/15/2021		\$75	
A MOST THE A MOST TO A STATE OF THE AMERICAN THE PROPERTY OF THE ACT OF THE A	Manuel A. Carrero		Operations Engineer
	17 Waverly Ave. Revere, MA 02151		Raytheon Technologies
10/15/2021		\$200	
	Maria Patino Balbin	The control of the co	Busser/Frontrunner
	17 Waverly Ave Revere, MA 02151		Hilton Back Bay
08/09/2021	Revere, PIA 02131	\$1000	
	Natalistanaun		
	Nataly Lopera 227 London St Apt 1		
10/06/2021	Boston, MA 02128	4100	
10/00/2021		\$100	
	Rubiela Patino 284 Mountain Ave		Bakery clerk Roche Bros
00/04/05	Revere, MA 02151	Name of the latest of the late	
08/24/2021		\$250	
	Susana Benitez 284 Mountain Ave		Sales Ops Coordinator Gulf Oil
	Revere, MA 02151	Richard Control of the Control of th	50.1 511
08/24/2021		\$250	
	Tyler Papciak		Not Employed
	131 Cross St Beverly, MA 02478		
08/22/2021		\$200	
	Vicky Arroyo		Senior Professional Learning Manager
	32 Iffley Rd Boston, MA 02130		Panorama Education
07/24/2021	DOSCOII, INA 02130	\$100	
	William Johnson		Electronic Technician
	3 Balcom Rd	William State Stat	Raytheon Technologies
07/01/2021	Pelham, NH 03076	\$1000	
	V A Datin		
	Yury A. Patino 227 London St Apt 1		Manager Harvard Gardens
10/06/2021	East Boston, MA 02128	\$100	
		\$100	I management of the second of
		San	
ine O. T-t-I D	into aven \$50 (an listed -1)		
line 9: Lotal Rece	ipts over \$50 (or listed above)	\$4,900	
ine 10: Total Peas	sints \$50 and under* (not listed share)		
line 10: 10tai Kece	eipts \$50 and under* (not listed above)	\$1,001	
ine 11. TOTAL I	RECEIPTS IN THE PERIOD		
MANUAL AUGUS	ALCEN IS IN THE PERIOD	\$5,901	← 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

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

	To Whom Paid		Daymage of Evnenditure	Amount
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
ng panggang mengabugang panggang mengang panggang di PPA 20 der 19 deri panggang dan mengang panggang mengang	Cinco de Mayo Restaurante y Cantina	124 Centennial Avenue Revere, MA 02151	Campaign Fundraiser	
				\$500
10/07/2021				
	Independent Newspaper Group, LLC	P.O. Box 380 385 Broadway	Advertising	
		Revere, MA 02151		\$72.00
09/30/2021				
	Independent Newspaper Group,	P.O. Box 380 385 Broadway	Advertising	
		Revere, MA 02151		\$65.00
10/05/2021				303.00
	SofisTech Inc.	121 Broadway Revere, MA 02151	Print and Marketing	
	The second secon			\$490.3
09/13/2021				3430.3.
	SofisTech Inc.	121 Broadway Revere, MA 02151	Print and Marketing	Linear resident
		The vere y in our sale		\$565.7
08/05/2021				\$303.7
	Staples	444 Broadway (Route 1) Saugus, MA 01906	Print and Marketing	
		Saugus, MA 01300		61740
09/29/2021				\$174.0
	United States Postal Service	475 L'Enfant Plaza SW Washington, DC 20260	Print and Marketing	
		Washington, DC 20200		155.0
08/30/2021				\$56.8
			The second of the second	
7	Autorities and a second			
b.				
	of the state of th			
	The state of the s			
	The second secon			
Recognition to a registration of the registrat		Line 12: Total Expenditure	es over \$50 (or listed above)	\$2,623.9
		Line 13: Total Expenditures \$50 and under* (not listed above)		\$25.9
		Line 14: TOTAL EXPEN		

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

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Tennamentalismassississississississississississississi				
		The state of the s		
de control				
				Contract of the Contract of th
	от постоять мед на него постоя стор али в него короли в него до постоя него него него акто длучаемы и выполнения постоя него него него него него него него него			
	NO MICHIGANI NA PROPRIATO NO PR			Principal designation of the Control
Example 1				
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and u	nder* (not listed above)	
	Enter on page 1 line 4 →	Line 14: TOTAL EXPENDITU	IRES IN THE PERIOD	

^{*} 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 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
	Alejandro Arango	248 Mountain Avenue Revere, MA 02151	Photography	
07/01/2021				\$150
	Manuel A. Carrero, Jr.	17 Waverly Ave.	Website Domain	
000000000000000000000000000000000000000	Marider A. Carrero, Jr.	17 Waverly Ave. Revere, MA 02151	Website Bollidai	
07/01/2021				\$293.2
-				
a department of the second	d.			
		AND THE PROPERTY OF THE PROPER		
		American Control of the Control of t		
		To common pair		
		Line 15: In-Kind Contributio	ons over \$50 (or listed above)	\$443.25
		Line 16: In-Kind Contributions \$50 & under (not listed above)		\$31.98
		Line 17: TOTAL IN-KIND		

^{*} 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
			National Action Control of Contro	
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		And the second s		
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			grand detailed and a control of the	
	Account			
				SECULAR COLLARS COL
				The second secon
Lancard Lancar		Line 18: TOTAL OUTSTAN	DING LIARII ITIES (ALL)	0