



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

BOARD OF  
ELECTION  
COMMISSIONERS

Fill in Reporting Period dates: Beginning Date: 10/16/21 Ending Date: 12/31/21 File with: City or Town Clerk of Election Commission  
2022 JAN 14 11:12 AM  
REVERE, MA

Type of Report: (Check one)

- 8th day preceding preliminary     8th day preceding election     30 day after election     year-end report     dissolution

AL FIORE  
Candidate Full Name (if applicable)

WARD 5 CITY COUNCILLOR  
Office Sought and District

350 REVERE BEACH BOULEVARD 6-6E REVERE MA 02151  
Residential Address

E-mail: ALFIORE@YAHOO.COM

Phone # (optional): 781-244-7446

Committee to Elect AL FIORE  
Committee Name

Michelle Hurley  
Name of Committee Treasurer

350 REVERE BEACH BLVD 6-6E REVERE, MA 02151  
Committee Mailing Address

E-mail: MMHURLEY1@COMCAST.NET

Phone # (optional): \_\_\_\_\_

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>3,693.46</u>
Line 2: Total receipts this period (page 3, line 11)	<u>7,800.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>11,493.69</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>11,327.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>166.69</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>9,956.61</u>
Line 8: Name of bank(s) used:	<u>People's UNITED BANK</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: Michelle M. Hurley (Treasurer's signature) Date: 1/1-22

#### 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.

Signed under the penalties of perjury: Al Fiore (Candidate's signature) Date: 1/1-22



## 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)
11-1-21	STEVEN CLAYMAN 400 REVERE BEACH BLVD REVERE, MA. 02151	250.00	RETIRED
10-31-21	KAREN FISTA 350 REVERE BEACH BLVD. REVERE, MA. 02151	100.00	
10-22-21	Dominic Finelli 199 REVERE ST. REVERE, MA. 02151	100.00	
11-9-21	ALBERT S. FIORE 350 REVERE BEACH BLVD. REVERE, MA. 02151	6,000.00	RETIRED (LOAN)
11-1-21	TOM FOTHUIGILL 200 JEFFERSON RD. WILMINGTON MA. 01887	200.00	ATTORNEY. SELF EMPLOYED
10-22-21	CAROL Healy 51 FLINT ST. REVERE, MA 02151	100.00	
10-25-21	JOHN MCGILICUDDY REVERE, MA. 02151	100.00	
11-2-21	Amy Monagle 1 CARLY CIRCLE REVERE MA. 02151	100.00	
11-1-21	Ali Salman 17 Kingman Ave. REVERE, MA. 02151	500.00	Self-Employed NOUR GAS STATION
11-2-21	Tom Rossi 500 OCEAN AVE. REVERE, MA. 02151	250.00	Self employed - Ticket Sales
10-26-21	SARA TICH 339 SQUIRE RD. REVERE, MA. 02151	100.00	

Line 9: Total Receipts over \$50 (or listed above)	7800.00
Line 10: Total Receipts \$50 and under* (not listed above)	0
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>	<b>7800.00</b>

← 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 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
7-25-21	ALBERT FIORE	350 REVERE BEACH BLVD REVERE, MA 02151	Printer & Ink.	292.21
8-2-21	ALBERT FIORE	"	PIZZA BEACH Clean up	79.20
8-3-21	ALBERT FIORE	<del>OFFICE Supplies</del> "	Office Supplies	30.84
8-6-21	ALBERT FIORE	"	Supplies	54.18
8-10-21	ALBERT FIORE	"	PIZZA CAMPAIGN Event	179.76
8-23-21	ALBERT FIORE	"	Postage	55.00
8-26-21	ALBERT FIORE	"	Supplies	37.02
8-26-21	ALBERT FIORE	"	Copies	61.95
11-9-21	ALBERT FIORE	"	LOAN	6,000.00
9-13-21	FREE STONE Communications	10 Fidler Pond Loop Beaufort, SC 29907	Phone Calls	1,351.35
9-7-21	FREE STONE Communications	"	Phone calls	<del>4,032.00</del> 1815.10

Enter on page 1, line 7 →

**Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)**

9,956.61