

Form CPF M 102: Campaign Finance Report **Municipal Form**

Office of Campaign and Political Finance ARD OF ELECTION COMMISSIONERS

Fill in Reporting Period dates: Beginning Date: 7	7/10/22 Ending Date: 8/10/22				
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution				
Rocal J. Clark Candidate Full Name (if applicable) Revere Ward S. Councilor Office Sought and District 98 Whitin Ave., Revere, MA 02151 Residential Address E-mail: committeetoelect ron clarkokaward S. com Phone # (optional): 781-718-4907	Ronald J. Clark Committee Name Revere Ward 5 Councilor Name of Committee Treasurer 98 Whitin Ave. Revere MA 02151 Committee Mailing Address E-mail: Committee to electron clark for ward 5.com Phone # (optional): 781-718-4907				
SUMMARY BALANC	CE INFORMATION:				
Line 1: Ending Balance from previous report	1.04				
Line 2: Total receipts this period (page 3, line 11)	1376.74				
Line 3: Subtotal (line 1 plus line 2)	1377.78				
Line 4: Total expenditures this period (page 5, line	ne 14) 13 76.74				
Line 5: Ending Balance (line 3 minus line 4)	1.04				
Line 6: Total in-kind contributions this period (page	age 6)				
Line 7: Total (all) outstanding liabilities (page 7)	3924,50				
Line 8: Name of bank(s) used: BA	ANK I I I I I I I I I I I I I I I I I I I				
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: Treasurer's signature) Date: 8 10 2 3 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 thance 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 Candidate without Committee Candidate without Committee Candidate without Committee Candidate with Committee Candidate without Committee Candidate with Candida					
Signed under the penalties of perjury:	(Candidate's signature)				

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
7/11/22	LOAN TO COMMITTEE	1376.74	
Line 9: Total Receipt	ts over \$50 (or listed above)		
Line 10: Total Receip	ts \$50 and under* (not listed above)		
	CEIPTS IN THE PERIOD		← Enter on page 1, line 2 I 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

eport all expend	ditures. Please include your comm To Whom Paid	intee name and a page number of	t cach pagesy	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
7111	MARIET BASHET	cyon mo	trosing soppies	69.90
7/12	Ruman Dournac	Broadway 12the	ADD	270.00
713	SALVY THE FLORIST	WESTARD AVE	Mostons supplies	199,72
7/15	ADVOCATE	Eurora MA	ADD	360.00
1/19	Palluly Poetzer	Bushoway Ream	CAMPAINS WOFFIT	160.00
7/19	BAPNICH'S PIZZA	Bern Bench Blub	WOAG-7 JUPPLITY	17762
7/22	POVOGORE	Fereness ma	ROD	140.00
Line 12: Total Expenditures over \$50 (or listed above)				1376.74
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES 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 ite Page 4 above.