

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance ELECTION COMMISSIONERS.

Fill in Rep	porting Period dates: Beginning Date: 7-7-707	Ending Date: 2-31-2022							
Type of R	eport: (Check one)	A by Y has I t how T. A second							
		y after election 💢 year-end report 🗌 dissolution							
E-mail: Phone # (option	Candidate Full Name (if applicable) Office Sought and District Neponcet St Revelle Residential Address E-mail:	Name of Committee Treasurer							
	SUMMARY BALANCE INFO	PRMATION:							
	Line 1: Ending Balance from previous report	8830.37							
*	Line 2: Total receipts this period (page 3, line 11)	8570.00							
	Line 3: Subtotal (line 1 plus line 2)	17400.37							
	Line 4: Total expenditures this period (page 5, line 14)	7819.77							
	Line 5: Ending Balance (line 3 minus line 4)	9580.60							
	Line 6: Total in-kind contributions this period (page 6)	10/							
	Line 7: Total (all) outstanding liabilities (page 7)	10/							
	Line 8: Name of bank(s) used: M FT Bank								
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:									
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: Date: 1/17-2023 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.)

37 33 13 13 13		
	Amount	Occupation & Employer (for contributions of \$200 or more)
Barrett, John 34 Woodland Rd. Revere, MA. 02151	250.00	Refired
Bocchino, Domenic Sovire Rd. Revere, MA. 02151	250.00	Principal-Bouchino Insurance
Buonfiglio, Paul 20 Wing Rd. Lynnfield, MA.	250.00	Fureral Director-Buonfiglio
Cossidy, Robert OM Marshall St. Revere, MA. Ozisi	500.00	Retired
Cragman, Steven 197 Commonwealth Ave Boston, MA: 02116	200.00	Attorney - Clayman Law
Cluen, Shown wa whitin the Pevere, MA. 02151	500.00	Principal - Transportation
Corey, Marcia 330 Reacon St. Boston, MA. DZIIIO	100.00	Retired
Cuoto, Jose 4 Buttonwas Dr. Andover, MA.	250.00	Principal - Dunkin Donuts
ocherty, Thomas 104 Waverly St. Everett, MA: Oziug	00.0001	Information Requested
MacDowell, Roy Ir. 10 Appletree Lare Wayland, MA	1000.0001	Principal-Real Estate Comp.
Motrollo, Kelleagn 34 Sprue Ro Reading, MA DISTOT	1000.00	Information Requested
MA & NE Laborers District 7 Laborers Way Council HOPKINTON, MA 01747	500.00	Officer-MA Laborers Council
ots over \$50 (or listed above)	5500.00	
pts \$50 and under* (not listed above)		Conta -
ECEIPTS IN THE PERIOD		← Enter on page 1, line 2
	BUNDANICA RA. REVERE, MA. 02151 BOCCHINO, DOMENIC SQUIRE RA. REVERE, MA. 02151 BUONFIGITO, POWI ZO WING RA. LYNNFIEW, MA. COSSINY, REVERT CIT MAISTICAL ST. REVERE, MA. 02151 CLAYMAN, STEVEN 197 COMMONWEATH Are BOSTON, MA. 02110 CLUEN, SHOWN WINTHIN AVE REVERE, MA. 02151 CARELY, MARCIA 330 REALON ST. REVERE, MA. 02110 CUOTO, JOSE 4 BUTTONWAS 100 WALVERY ST. PANDOVER, MA. WALPHY, THOMAS 100 WALVERY ST. 10 APPRETER LANE WALLAND, MA MOTOLIO, KELLEGIN 34 SPILE RO REVENDING MA 015107 MA 3 NE LABORETS DISTRICT 1 LABORETS NOW CAUNCH HOPKINTON, MA 01747 pts over \$50 (or listed above) pts \$50 and under* (not listed above)	(alphabetical listing required) Barrett, John 34 Wacabard Rd. Revere, MA. 02151 Boxchiro, Domenic Soure Rd. Revere. MA. 02151 Boshiro, Paul Zo Wing Rd. Lynnfield, MA. Cossidy, Rabert GT Maishaul St. Revere, MA. 02151 Chagman, Steven 19T Commonwealth Are Boston, MA. 02114 Cluen, Shawn Within the Revere, MA. 02151 Crey, Marcia 330 Reacan St. Boston, MA. 02114 Cuoto, Jose 4 Buttonwad Dr. Andover, MA. Cherty, Thomas Iou Waverly St. Everett, MA. 02149 MacDowell, Roy Jr. 10 Appletree Lare Wayland, MA Matrollo, Kelledgn 34 Sprue Rd. Redwing, MA Distort MA Sine Laborers District 1 Laborers Way Cuncil Hopkinton, MA 07147 pts over \$50 (or listed above) pts \$50 and under* (not listed 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

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)				
7-30	Salman, Ati 17 Kingman Ave Revere MA 02151	1000.00	Gurage Owner				
7-28	Serra, Emanuel 17 a Ocean Pier Ave. Revere MA 02151	200.00	Seif Employed				
7-13	Settipane, William 39 Comming Ave. Revere, MA 02151	300.00	Retired				
7-13	Strelitz, Robert 14 Archer Ave Revere MA 02151	100.00					
7-10	Szary, Dumian 31 Monoment Ave Charlestown, MA	500.00	Real Estate Developer				
7-30	Velardo, Lisa 649 Revere Beach Blud. Revere, MA. 02151	100.00	Layer and the second se				
7-11	Zaccaria, Michael 123 Cushman Ave Revere, MA. 02151	Z50.00	Self Employed - Action Towing				
Line 9: Total Rece	ipts over \$50 (or listed above)	2450.00	Sheet 2 receipts 3070.00				
Line 10: Total Rece	cipts \$50 and under* (not listed above)	620.00	Sheet I receipts 5500.00				
Line 11: TOTAL 1	RECEIPTS IN THE PERIOD	3070.00	← 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 (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount			
	SEE	ATTACHE					
			4-11-11-11-11-11-11-11-11-11-11-11-11-11				
	Line 12: Expenditures over \$50 (or listed above)						
		Line 13: Expenditures \$50 and ur	nder* (not listed above)				
I		Line 14: TOTAL EXPENDITU		7819.TT			

^{*} 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 B --- Expenditures

E607/17/7T	17/77/2000	/	12/9/2022	12/17/2022	7/22/2022	//18/2022	7/14/2022			1/12/2022	7/12/2022	7/12/2022	// 13/2022	7/6/2022	Date Paid
Revere Journal	George Kosa !!	INIGILIE NESIGNIALI	Marina Postalizat	Postmaster-Boston	Anne Warham	James O'Brien	Madison Group, Inc.	Jack Satter House	Satter Tenants Association	The Revere Advocate	Revere Journal	George Landers	The Marina Restaurant	Fast Signs	Paid To
385 Broadway, Revere, MA	34 Harrington Avenue	North Shore Road, - Revere MA	No extra Neway	VEW Parkway	107 Constitution Avenue, Revere, MA	87 Atwood Street, Revere, MA	5 Whitney Street, Saugus, MA	420 Revere Beach Boulevard, Revere, MA	Satter Tenants Association 420 Revere Beach Boulevard, Revere, MA	573 Broadway, Everett, MA	385 Broadway, Revere, MA	420 Revere Beach Boulevard, Revere, MA	North Shore Road, - Revere MA	155 A New Boston St., - Woburn, MA	Address
Advertising	Donation for Card Show	Lunch with Supporters	Postage for Mailing	Don't be a second control of the second cont	Working on Telephone Bank	Reimbursement for Pastry	Mailings on Boulevard	Coffee - for Reception	Donation for Barbecue	Advertising	Advertising	Entertainment	Reception & Fundraiser	Purchase Signs	Purpose of Expenditure
180.00	150.00	126.68	120.00	300.00	300 00	152.00	1246.75	135.00	500.00	969.00	1388.00	250.00	1983.59	318.75	Amount

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)	101
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	101
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	-0/

^{*} 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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