

Form CPF M 102: Campaign Finance Report Municipal Formard of Office of Campaign and Political Finance N

| Commonwealth of Massachusetts | 15 AUG 25 File With 8: Old Town Clerk or Election Commission |
|--|---|
| Fill in Reporting Period dates: Beginning Date: /-/ | 2015 Ending PaleMA 8.14.2015 |
| Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election [| 30 day after election year-end report dissolution |
| Steven Moreubite Candidate Full Name (if applicable) | Steven Morabito - Committee to Elect Committee Name |
| Prescre City Coorcillor -at-Large Office Sought and District | Name of Committee Treasurer |
| 84 Florence Ave. Revere, MA 02181 | 84 Florence Aver Revere, ma Oals! Committee Mailing Address |
| Felephone Number (optional): | Telephone Number (optional): (M81) 420-6975 |
| SUMMARY BALANC | E INFORMATION: |
| Line 1: Ending Balance from previous report | \$340.01 |
| Line 2: Total receipts this period (page 3, line 11) | 1,100.00 |
| Line 3: Subtotal (line 1 plus line 2) | 1,440.01 |
| Line 4: Total expenditures this period (page 5, line | 1123,93 |
| Line 5: Ending Balance (line 3 minus line 4) | 3/6.08 |
| Line 6: Total in-kind contributions this period (page | ge 6) |
| Line 7: Total (all) outstanding liabilities (page 7) | 6 |
| Line 8: Name of bank(s) used: Oitizens | Bank |
| Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind e tinance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury: | contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G. L. c. 55. (Treasurer's signature) Date: 8/2/15 |
| FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box | x only) |
| Candidate with Committee and no activity independent of the committee 1 certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting | best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period. |
| Candidate without Committee OR Candidate with independent activity filing see I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, recorpts, expenditures disbursements campaign finance activity of all persons acting linger the authority of on behalf of this | best of my knowledge and belief, a true and complete statement of all campaign |
| Signed under the penalties of perjury: Theren miles | (Candidate's signature) Date: 8/20/15 |

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.)

| | Name and Residential Address | | Occupation & Employer |
|--|---|----------|--------------------------------------|
| Date Received | (alphabetical listing required) | Amount | (for contributions of \$200 or more) |
| | heer to attached | | |
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| | ipts over \$50 (or listed above) eipts \$50 and under* (not listed above) | 1,050,00 | |
| | RECEIPTS IN THE PERIOD | 1,100,00 | 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.

| Date Received | Name | Address | Amount | Occupation |
|---------------|--|---------------------------------------|----------|-----------------------------|
| 4/21/2015 | Massachusetts & Northern New England Laborers' District Council Political League | 7 Laborers Way, Hopkinton, MA 01748 | 250 00 | Laboreres' District Council |
| | Carpenters Local Union No 218 | 35 Salem Street, Medford, MA 02155 | 100 00 | |
| 4/16/2015 | International Brotherhood of Fireman & Oilers Local #3 | P.O. Box 290423 Charlestown, MA 02129 | 100 00 | |
| 4/16/2015 | Carpenters Local Union 26 | 350 Fordham Road Wilmington MA 01887 | 150 00 | |
| 5/22/2015 | Roofer's Local 33 | 63 Evans Drive Stoughton MA 02072 | 250 00 | |
| 6/9/2015 | Revere Friefighters Assoc Local 926 | 400 Broadway, Revere, MA 02151 | 200 00 | |
| | | | | |
| | | Total | 1,050.00 | |

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 |
|--|-------------------------------------|-----------------------------|------------------------------------|---------|
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| 3 | | Line 12: Total Expenditures | over \$50 (or listed above) | 1,040,0 |
| | | | \$50 and under* (not listed above) | 83.9 |
| | Enter on page 1, line 4 - | | TITURES IN THE PERIOD | 1/123 |

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

| DATE | VENDOR/ADDRESS | EXPENDITURE PURPOSE | AMOUNT |
|-----------|------------------------------|--|------------|
| | | | |
| 4/2/2015 | Rumney Marsh Academy PTO | Donation | \$115.00 |
| 5/11/2015 | Susan B. Anthony PTO | Donation | \$100.00 |
| 7/20/2015 | USPS | Office Bulk Mail, Postal Permit Fee, and 3,000 precancelled stamps | \$525.00 |
| 8/14/2015 | The Advocate Newspapers Inc. | Campaign Advertisement | \$300.00 |
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| | | TOTAL EXPENSES OVER \$50 | \$1,040.00 |
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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 |
|---------------|---------------------------|--------------------------------|---------------------------------|-------|
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| | | 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 → | Line 17: TOTAL IN-KIND CO | ONTRIBUTIONS | N/P |

^{*} 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 |
|--|-------------|-------------------------|---------|--|
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| Andrewson | | Line 18: TOTAL OUTSTAND | | NA |

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