

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

JAN 14 PM 12: 37

Fill in Reporting Period dates: Beginning Date: 01-01-2	Ending Date: 12-31-2014 IA
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day after election ⊠ year-end report ☐ dissolution
Jessica Ann Giannino	C-T-E Jessica Ann Giannino
Candidate Full Name (if applicable)	Committee Name
Councillor At Large-City of Revere	Joann Giannino
Office Sought and District	Name of Committee Treasurer
14 Sigourney St., Revere, MA 02151	14 Sigourney St.,Revere, MA 02151
Residential Address	Committee Mailing Address
Telephone Number (optional): 7812843724	Telephone Number (optional):
SUMMARY BALANCE	INFORMATION:
Line 1: Ending Balance from previous report	\$12,668.33
Line 2: Total receipts this period (page 3, line 11)	\$550.00
Line 3: Subtotal (line 1 plus line 2)	\$13,218.33
Line 4: Total expenditures this period (page 5, line	14) \$1,789.70
Line 5: Ending Balance (line 3 minus line 4)	\$11,428.63
Line 6: Total in-kind contributions this period (page	e 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: East Boston Savings B	dank
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind cor finance activity of all persons acting under the authority or on behalf of this committee in ac Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box of Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the beactivity, of all persons acting under the authority or on behalf of this committee in acconfine incurred any liabilities nor made any expenditures on my behalf during this reporting personal certify that I have examined this report including attached schedules and it is, to the befinance activity, including contributions, loans, receipts, expenditures, disbursements, incampaign finance activity of all persons acting under the authority or on behalf of this committee.	ntributions and liabilities for this reporting period and represents the campaign cordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 01-13-2014 only) est of my knowledge and belief, a true and complete statement of all campaign finance rdance with the requirements of M.G.L. c. 55. I have not received any contributions, eriod. arate report est of my knowledge and belief, a true and complete statement of all campaign n-kind contributions and liabilities for this reporting period and represents the

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)
	See Attached list	The second secon	
] [
ine 9: Total Rec	eipts over \$50 (or listed above)	\$550.00	
Line 10: Total Red	ceipts \$50 and under* (not listed above)	0	
ine 11. TOTAL	RECEIPTS IN THE PERIOD	\$550.00	← Enter on page 1, line 2
		L	Id include only those receipts not itemized above.

Date	Last Name	First Name	Street	City	State	Amount	Occupation
	Revere Firefighters Association		400 Broadway	Revere	MA	\$100.00	
6/12/2014	Eanouil	Edward	56 Gatewood Dr.	Needham	MA	\$150.00	
6/12/2014	Slifka	Eric	9 Clark Rd	Wellesley Hills	MA	\$150.00	
6/12/2014	Slifka	Richard	PO BOX 9161	Waltham	MA	\$150.00	
					Total	\$550.00	
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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 report all expenditures. Please include your committee name and a page number on each page.)

eport all expenditures. Please include your committee name and a page number on each page.)					
To Whom Paid Date Paid (alphabetical listing) Address Purpose of Expenditure Amount					
Date Paid	(alphabetical listing)	Address	Amount		
	See Attached list				
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1	2	10 7 17	0.50 (1' , 1 1)	d1 700 70	
		Line 12: Total Expenditures ov	er \$50 (or listed above)	\$1,789.70	
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	0	
		Line 15. Total Expellutures \$5	and under (not nated above)		
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	\$1,789.70	
		r. include them in line 12. Line 13 s			

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

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Date Paid	To Whom Paid	Address	Purpose of Expenditure	Amount
5/19/2014	AIDs Walk Boston	75 Amury St., Boston	Donation	\$60.00
1/20/2014	Avon Walk for Breast Cancer	PO BOX 1073, Rye, NY	Donation	\$50.00
11/17/2014			Donation	\$35.00
	CTE RoseLee Vincent	Revere Beach Blvd	Donation	\$50.00
	CTE Jerry Goodwin		Donation	\$50.00
	City of Revere Community Scolarship		Donation	\$50.00
	Independent Newspaper Group	385 Broadway	Ad	\$137.70
	Independent Newspaper Group	385 Broadway	Ad	\$80.00
	Independent Newspaper Group	385 Broadway	Ad	\$50.00
	Independent Newspaper Group	385 Broadway	Ad	\$50.00
	Italian National Honor Society	Revere High School	Donation	\$50.00
	Revere Fire Dept.	400 Broadway	Donation	\$100.00
	Sandcastle Festival	400 Bloadway	Donation	\$150.00
	Seacoast High School	15 Everard St	Donation	\$50.00
	St Anthony of Pauda	250 Revere St	Ad	\$100.00
	St Anthony of Pauda	250 Revere St	Tickets for Feast	\$30.00
***************************************	The Advocate Newspaper Inc.	PO BOX 490407, Everett	Ad	\$350.00
	The Advocate Newspaper Inc. The Advocate Newspaper Inc.	PO BOX 490407, Everett	Ad	\$100.00
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Tornado Fund	FO BOX 430407, Everett	Donation	\$100.00
	U.S. Postal Service	Broadway, Revere	Stamps	\$147.00
12/4/2014	U.S. Postal Service	Broadway, Nevere	Total	\$1,789.70

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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
	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 CONTRIBUTIONS				C

^{*} 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
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	0