

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

BOARD OF ELECTION COMMISSIONERS

	File with: City or Town Clerk or Election Commissio
Fill in Reporting Period dates: Beginning Date: 08-	15-15 Ending Date: 10-16-15 ERE. MA
Type of Report: (Check one)	
8th day preceding preliminary	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	14 Sigourney St
Residential Address	Committee Mailing Address
Telephone Number (optional): 7812843724	Telephone Number (optional):
SUMMARY BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	\$21,717.86
Line 2: Total receipts this period (page 3, line 11	\$4,720.00
Line 3: Subtotal (line 1 plus line 2)	\$26,437.86
Line 4: Total expenditures this period (page 5, li	ne 14) \$5,575.79
Line 5: Ending Balance (line 3 minus line 4)	\$20,862.07
Line 6: Total in-kind contributions this period (p	page 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: East Boston Saving	gs Bank
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the becativity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee is Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be activity 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 a incurred any liabilities nor made any expenditures on my behalf during this reporting	d contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date: 10-23-15  Dox only)  The best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions.
Candidate without Committee OR Candidate with independent activity filing s  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the Signed under the penalties of perjury:	ne best of my knowledge and belief, a true and complete statement of all campaign ts, in-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)					
	Page 1 attached		(101 contributions of \$200 of more)					
		\$4,870.00						
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ine 9: Total Recei	ipts over \$50 (or listed above)	\$4870.00						
	7	7.3330						
ine 10: Total Rece	cipts \$50 and under* (not listed above)	\$270.00						
ne 11: TOTAL I	RECEIPTS IN THE PERIOD	\$4,870.00	← Enter on page 1, line 2					

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

Occupation				Self employed		Electrician				Self employed	Global	Global	Homemaker				
Amount	\$100.00	\$150.00	\$100.00	\$500.00	\$500.00	\$250.00	\$100.00	\$500.00	\$150.00	\$500.00	\$500.00	\$500.00	\$500.00	\$250.00	\$4,600.00	\$270.00	\$4,870.00
State	MA	MA	MA	MA	MA	MA	MA	MA	MA	MA	MA	MA	MA	MA	N.		
City	Revere	Revere	Peaody	Lynnfield	Needham	Revere	Revere	Boston	Danvers	Woburn	Wellesley Hills	Waltham	Charlestown	Boston	Total over \$50	Total under \$50	Total Receipts
Street	245 Reservoir Ave	128 Revere St	37 Samoset Rd	507 Essex St	56 Gatewood Dr	727 Revere Beach Pkwy	23 Mountain Ave	550 Medford St	7 Spruce St	3 Rose Farm Lane	9 Clark Rd	PO BOX 9161	65 Chelsea St	544 Main St			
First Name	Mr. and Mrs.	Paul	Mr. and Mrs.	Joseph	Edward	Robert	George	CPF ID 80323	Shana	Joseph	Eric	Richard	Daveen	OCPF ID 80220			
Last Name	Argenzio	Buonfiglio	Collyer	Dinanno	Faneuil	Inello	Maglione	Mass Bricklayers Local 3	Murphy	Prizio	Slifka	Slifka	Speer	Teamsters Local 25			
Date	10/8/2015	9/21/2015	10/4/2015	7/15/2015	6/19/2015	10/12/2015	10/14/2015	8/25/2015	9/22/2015 Murphy	8/27/2015	8/5/2015	8/4/2015 Slifka	10/11/2015	9/18/2015			

#### **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.)

Date Paid	To Whom Paid	4.17	D	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	Page 1 attached			
		] [		
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	The Thomas Manager Manager and the			
				94h
		Line 12: Total Expenditures over	er \$50 (or listed above)	
		HATCHIST TO SEE	Į.	
		Line 13: Total Expenditures \$50	and under* (not listed above)	
			URES IN THE PERIOD	

<sup>\*</sup> 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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#### SCHEDULE B: EXPENDITURES

Date Paid	To Whom Paid	Address	Purpose of Expenditure	Amount
10/7/2015	Ad Power	Neponset St	Advertistng	\$803.42
9/29/2015	Bianco & Sons	375 Revere St	Food for primary	\$54.00
9/1/2015	BJ'S	5 Ward St	Food for primary	\$40.14
10/5/2015	BJ'S	5 Ward St	Lables	\$19.11
8/21/2015	Camridge offset Printing	56 Creighton St	Palm cards	592.07
10/16/2015	Castles			\$50.00
8/21/2015	City of Revere	281 Broadway	Parade Breakfast	\$100.00
9/3/2015	For Kids Only After School			\$100.00
9/18/2015	Help Jude Battle Breast Cancer	GoFundMe	Donation	\$50.00
9/1/2015	Honey Dew Donuts	Squire Rd	Coffee for primary	\$358.29
9/7/2015	Immaculate Conception Church	22 Lowe St	Donation	\$100.00
	Jessica Giannino	Reimbursement	Scratch Tickets- Rosetti Center	\$50.00
9/23/2015	John Finn	400 Broadway	RFD Retirement Lunch	\$100.00
8/25/2015	Just a little help Burial Funds	PO BOX 262	Donation	\$50.00
8/20/2015	Luerto's Pastry Shop	208 Broadway	Food for Rosetti Center	\$43.87
9/10/2015	Parkway Produce	26 Gladstone St	Fruit Baskets	\$150.00
8/25/2015	RHS Golf Parents Club		Donation	\$100.00
10/10/2015	Robert Sarcia	Balloon Boss	Parade supplies	\$475.29
10/9/2015	Skin Tight Graphics	Revere St	Shirts	\$252.00
8/29/2015	St. Anthony's Church	Revere St	Donation	\$100.00
9/19/2015	St. Anthony's Church	Revere St	Donation	\$30.00
9/17/2015	St. Mary's Church	670 Washington Ave	Donation	\$50.00
8/27/2015	The Advocate Newspapers	PO BOX 49047	Advertistng	\$50.00
9/14/2015	The Advocate Newspapers	PO BOX 49047	Advertistng	\$50.00
9/17/2015	The Advocate Newspapers	PO BOX 49047	Advertistng	\$360.00
10/14/2015	The Advocate Newspapers	PO BOX 49047	Advertistng	\$100.00
8/17/2015	The Independent Newspaper	385 Broadway	Advertistng	\$240.00
8/24/2015	The Independent Newspaper	385 Broadway	Advertistng	\$240.00
9/8/2015	The Independent Newspaper	385 Broadway	Advertistng	\$180.00
10/3/2019	Thriftco Printing	26 Howley St	Invitations	\$208.04
10/3/2015	5 Thriftco Printing	26 Howley St	Envelopes	\$26.56
8/27/2015	U.S. Postal Service	VFW Parkway	Stamps	\$147.00
10/7/2015	5 VFW Post 6172	Bennington St	Hall	\$200.00
9/1/201	Woody's Liquors	Broadway	Beverages for primary night	\$106.00
			Total	\$5,575.79

### 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 $6 \rightarrow$	, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS					

<sup>\*</sup> 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
		Line 18: TOTAL OUTSTAND		