

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

of Massachusetts File with: City or Town Clerk or Election Commission						
Fill in Reporting Period dates: Beginning Date: [1.1.1] Ending Date: [1.3]:12						
Type of Report: (Check one)						
8th day preceding preliminary 8th day preceding election 30 day after election gear-end report dissolution						
Arthur F. Guinasso Candidate Full Name (if applicable) Councillor Ward 3 Office Sought and District Councillor Ward 3 Name of Committee Treasurer						
2 Martin St. 2 Martin St.						
Residential Address Committee Mailing Address						
Telephone Number (optional): 781-284-3339 Telephone Number (optional):						
SUMMARY BALANCE INFORMATION:						
Line 1: Ending Balance from previous report 11,870.25						
Line 1: Ending Balance from previous report //,870.25 Line 2: Total receipts this period (page 3, line 11) // 300.00						
Line 3: Subtotal (line 1 plus line 2) 13,170.25						
Line 4: Total expenditures this period (page 5, line 14) Line 5: Ending Balance (line 3 minus line 4) 2,842.99 10,327.26						
Line 6: Total in-kind contributions this period (page 6)						
Line 7: Total (all) outstanding liabilities (page 7)						
Line 8: Name of bank(s) used: Bank of America						
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: Date: Other Date:						
Signed under the penalties of perjury: The Date: Treasurer's signature Date: Treasurer's signaturer's signature Da						
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 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.						
Candidate without Committee OR Candidate with independent activity filing separate report 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 committee in accordance with the requirements of M.G.L. c. 55.						
Signed under the penalties of perjury: Littus 7- Dunisho (Candidate's signature) Date: 1/7/13						

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.)

Data Passinad	Name and Residential Address	Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
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		The series	
ine 9: Total Recei	pts over \$50 (or listed above)		
ine 10: Total Recei	pts \$50 and under* (not listed above)		
11 momit n	TOTAL THE TANK THE TA		
ne 11: TOTAL R	ECEIPTS IN THE PERIOD	1,300.00	← 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 A: Receipts			
Date	From Whom Received	Residential Address	Amount
4/26/2012	Ralph Caruso, Jr.	320 Charger St. Revere, MA 02151	250.00
A DECEMBER OF STREET	•	Construction Co. Owner	
4/6/2012	Gennaro D'Ambrosio	14 Proctor Ave. Revere, MA 02151	250.00
		Attorney At-Law	
3/15/2012	Fred DiCesare	1605 N. Shore Road Revere, MA 02151	500.00
		Real Estate Developer	
1/9/2012	Revere Firefighters Assoc.	400 Broadway Revere, MA 02151	100.00
	Local 926		
4/6/2012	Anil Patel	1120 North Shore Rd. Revere, MA 02151	200.00
		Food Store owner	
		Total receipts in excess of \$50	1,300.00
	Line 10:	Total receipts \$50 and under	
	Line 11:	TOTAL RECEIPTS IN THE PERIOD	1,300.00

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 report all expenditures. Please include your committee name and a page number on each page.)

report all expend	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		
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	Line 12: Total Expenditures over \$50 (or listed above)					
	Line 13: Total Expenditures \$50 and under* (not listed above)					
	Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD 2842,99					
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD 2843.99						

^{*} 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: EXPENDIT	URES	
Date Paid	To Whom Paid	Address	Purpose of Expenditure	Amount
5/17/2012	Cilvio Colla Family Foundation	P. O Boz 1074 Lynnfield, MA 01940	Donation	100.00
		281 Broadway Revere, MA 02151	Donation / Parade	50.00
	City of Revere Holiday Fund	281 Broadway Revere, MA 02151	Donation	25.00
	Friends of WCOA	35 Harvard St. Winthrop, MA 02152	Ad Book	125.00
12/6/2012	Home for Little Wanderers	160 Lantern Road Revere, MA 02151	Donation	25.00
	Immaculate Conception Church	22 Beach St. Revere, MA 02151	Donation	50.00
1/16/2012	Independent Newspaper Group	385 Broadway Revere, MA 02151	Ad 12/21/11	60.00
2/10/2012	Independent Newspaper Group	385 Broadway Revere, MA 02151	Balance Ad 11/2/11	145.00
		385 Broadway Revere, MA 02151	Ad 5/23/12	50.00 50.00
11/19/2012	Independent Newspaper Group	385 Broadway Revere, MA 02151	Ad 11/7/12	75.00
		385 Broadway Revere, MA 02151	Ad 11/21/12	50.00
	Knight's of Columbus	29 Central Ave. Revere, MA 02151	Donation	100.00
	Leanne's Dream Foundation	10 Gove St. East Boston, MA 02128	St Patricks Day Party	40.00
	Loyal Order of Moose	470 Broadway Revere, MA 02151 470 Broadway Revere, MA 02151	Dues 2012	60.00
	Moose International Moose International	470 Broadway Revere, MA 02151	Dues 2012	30.00
	Olivia Novoselsky	53 Dehon St. #2 Revere, MA 02151		50.00
	Operation Troop Support	25 Winthrop Ave. Revere, MA 0215		25.00
	Paul Revere School PTO	395 Revere St. Revere, MA 02151	Donation	100.00
8/20/2012		281 Broadway Revere, MA 02151	Bocce Tournament	150.00
5/17/2012	Revere Beach Partnership	150 Beach St. Revere, MA 02151	Donation	100.00
9/12/2012	Revere Chamber of Commerce	270 Broadway Revere, MA 02151	Luncheon	20.00
2/27/2021	Revere High School	101 School St. Revere, MA 02151	Health & Wellness Fair	25.00
1/1/2012	Revere Inaugural Fund	35 Roland Road Revere, MA 02151		200.00
2/27/2012	Revere Little League	P O Box 96 Revere, MA 02151	Outfield Signage	150.00
6/20/2012	Revere Moose	470 Broadway Revere, MA 02151	BBQ Night	40.00
	Revere Moose	470 Broadway Revere, MA 02151	Donation	25.00
	RHS Basketball Parents Club	174 Suffolk Ave. Revere, MA 02151	Sponsor Hole	75.00
	RHS Hockey Parents Club	18 Montfern Ave. Revere, MA 0215		50.00 50.00
	Revere Public Library	179 Beach St. Revere, MA 02151	Donation	50.00
	Save Our Lady of Lourdes	385 Broadway Revere, MA 02151	Donation Dues 2012	90.00
	Soccorso Club	201 Revere St. Revere, MA 02151	Ad / Ad Book for Feast	100.00
	St. Anthony of Padua	250 Revere St. Revere, MA 02151 250 Revere St. Revere, MA 02151	Donation Donation	200.00
	St. Anthony of Padua	Revere, MA 02151	4 Gift Certificates	100.00
6/28/2012	Stop & Shop	Saugus, MA 01906	Flag/ Friendly Gardens	31.99
11/30/2012		Saugus, MA 01906	Friendly Garden Holiday Party	96.00
	Judy Weiss	35 McCoba St. Revere, MA 02151	Harry Landry Retirement	50.00
	Line 13:	Expenditures over \$50 Expenditures \$50 and under		2,812.99 30.00
	Line 14	TOTAL EXPENDITURES		2,842.99

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 →	6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

^{*} 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	
10/11/02	111 -	24 4 6/0	Loan	2000	
10/14/63	HYTHUY F. GUINGSSO	2 Martin St. Reure	Loan	2,000	
	Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				