

Form CPF M 102: Campaign Finance Report M 102: Campaign 1 Magazin Municipal Form ELECTION COMMISSIONERS Office of Campaign and Political Finance 15 JAN 22 AM 10: 11

	File with: City or Town Clerk or Election Commission			
Fill in Reporting Period dates: Beginning Date: /	/./4 Ending Date: / > . 3/./4			
Type of Report: (Check one)				
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution			
out day proceeding promisely	70.			
DAN MAGUIRE	Committee to Reclack DAN MAGUIRE			
Candidate Full Name (if applicable)	Committee Name			
Revere School Committee	Thomas Sena			
Office Sought and District	Name of Committee Treasurer			
114 PEARL AVE REVERMA OZITI	14 PEARL AVE. Rever MA OLIST			
Residential Address	Committee Mailing Address			
Telephone Number (optional):	Telephone Number (optional): 781-724-6524			
SUMMARY BALANC	CE INFORMATION:			
	(206 24			
Line 1: Ending Balance from previous report	672:21			
Line 2: Total receipts this period (page 3, line 11) 560-			
Line 3: Subtotal (line 1 plus line 2)	1185.34			
Line 4: Total expenditures this period (page 5, li	ne 14) 880 . 27			
Line 5: Ending Balance (line 3 minus line 4)	305.07			
Line 6: Total in-kind contributions this period (p				
Line 7: Total (all) outstanding liabilities (page 7	7301.			
Line 8: Name of bank(s) used: EAST BE	oston Savings			
Affidavit of Committee Treasurer:				
I certify that I have examined this report including attached schedules and it is, to the be	d 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:				
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1)	box only)			
Candidate with Committee and no activity independent of the committee	the best of any browledge and ballief a true and complete statement of all campaign finance			
I certify that I have examined this report including attached schedules and it is, to to activity, of all persons acting under the authority or on behalf of this committee in incurred any liabilities nor made any expenditures on my behalf during this reporting	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, ng 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				
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a title date experts and represents the 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.				
	(Candidate's signature) Date:			

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.)

eport an receipts.	Please include your committee name and a pa	S Humber on Ca	Occupation & Employer
Date Received	Name and Residential Address te Received (alphabetical listing required)		(for contributions of \$200 or more)
10 14		Amount	Letter CArrier
101.1.1	DAN MAGUIRE 114 PEARL AVE REVEN	500	USP5
Line 9: Total Rec	eeipts over \$50 (or listed above)	300-	
Line 10: Total Re	ceipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD	560-	Enter on page 1, line 2
If you have itemiz	ed receipts of \$50 and under, include them in lin	ne 9. Line 10 shou	ald include only those receipts not itemized above. Page

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 (alphabetical listing)	Address	Purpose of Expenditure	Amount
3/26/14	Beachmont	PO BOX Rever ma orisi	DONATION	60-
	MAdison Principag	300 B'WAY Rever MA 024/	Polifical MA; Ling	200-
4/3/14	Revere Little League	205 winthrop Ade Reve out 0215/	DONATION	150-
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above) 470, 27				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD * If you have itemized expenditures of \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized				

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

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			

^{*} 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
10/1/14	Dan Maguile	114 Pearl Ace	loan	500.00
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				

7201.10

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