

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: **Ending Date:** Type of Report: (Check one) 30 day after election year-end report 8th day preceding preliminary 8th day preceding election dissolution COMMITTEE FOR IRA NOVOSELSKY IRA NOVOSELSKY Candidate Full Name (if applicable) CITY COUNCILLOR, WARD 2, REVERE
Office Sought and District M. GOLDSTEIN NANCY Name of Committee Treasurer DEHON STREET, #1, REVERE MAO 2151 51 DEHON STREET, #1, REVERE, MA 02151

Committee Mailing Address 781-284-4097 Telephone Number (optional): Telephone Number (optional): 781-289-7031 **SUMMARY BALANCE INFORMATION:** 24, 096.15 Line 1: Ending Balance from previous report 2, 261.79 Line 2: Total receipts this period (page 3, line 11) \$ 26, 357.94 Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) 3,541.55 **Line 5:** Ending Balance (line 3 minus line 4) \$ 22,816.39 Line 6: Total in-kind contributions this period (page 6) 294.00 Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used: ST. JEAN'S CREDIT UNION
184 SHIRLEY AVENUE, REVERE, MA 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. 01-15-15 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 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: (Candidate's signature)

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.)

report all receipts. Please include your committee name and a page number on each page.) Name and Residential Address Occupation & Employer					
		Amount	Occupation & Employer (for contributions of \$200 or more)		
Date Received		Amount			
03-05-14	CLAYMAN, STEVEN 197 COMMONWEALTH AVE. BOSTON, MA 02116	\$200.00	REAL ESTATE MANAGER SELF-EMPLOYED		
11-14-14	CLAYMAN, STEVEN 197 COMMONWEALTH AVE. BOSTON, MA 02116	\$ 200.00	REAL ESTATE MANAGER SELF-EMPLOYED		
0[-08-14	CORDERO, NARTH 86 SHIRLEY AVE. REVERE, MA 02151	\$200.00	BOOKKEEPER CAFETERIA LAS DELICIAS COLUMBIANAS SHIRLEY AVE., REVERE, MA 02151		
06-10-14	FANEUIL, EDWARD J. 55 GATEWOOD DRIVE NEEDHAM, MA 02492	\$ 150.00	GENERAL COUNSEL GLOBE PETROLEUM CORP. 800 SONTH ST. WALTHAM, MA 02454		
05-30-14	HART, JOSEPH B. 136 BOYLSTON ST., #4 BOSTON, MA 02116	\$ 500.00	REAL ESTATE DEVELOPER SELF-EMPLOYED		
05-15-14	NOVOSELSKY, FLORENCE 51 DEHON ST., # 2 REVERE, MA 02151	\$ 500.00	RETIRED COMMONWEALTH OF MA		
06-10-14	SLIFKA, ERIC C. 9 CLARK ROAD WELLESLEY HILLS, MA 02481	\$ 150.00	PRESIDENT/C.E.O. GLOBAL COMPANIES, LLC 800 SOUTH ST. WALTHAM, MA 02454		
06-10-14	SLIFKA, RICHARD B. 776 BOYLSTON ST., UNIT 10E BOSTON, MA 02199	^{\$} 150.00	DIRECTOR/CHAIRMAN OF THE BOARD GLOBALICOMPANIES, LLC 800 SOUTH ST. WALTHAM, MA 02454		
06-25-14	VITO, RALPH 29 RAVENNA AUE. SALEM, MA 01970	\$ 100.00	PROPRIETOR BEACH LIQUORS SHIRLEY AVE. REVERE, MA 02151		
Line 9: Total Receipts over \$50 (or listed above) \$\frac{1}{2,150.00}\$					
Line 10: Total Receipts \$50 and under* (not listed above) \$\\\ \forall \tau11.79					
Line 11: TOTAL RECEIPTS IN THE PERIOD \$2,261.79 ← 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 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.)

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D-4- D-11	To Whom Paid	Addison Description And Addison Description Addison Description And Addison Description And Addison Description An			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
05-05-14 through 12-02-14	ADVOCATE NEWSPAPER	P.D. BOX 490407 EVERETT, MA 02149	POLITICAL ADVERTISING	\$ 450.00	
05-05-14	CELLA FAMILY FOUNDATION	P.O. BOX 1074 LYNNFIELD, MA 01940	FUNDRAISER- GOLF TOURNAMENT	\$100.00	
02-03-14 thru 10-20-14	FREEDOMS FOUNDATION BAY STATE CHAPTER	P.O. BOX 287 EAST BOSTON, MA 02128	DONATIONS AND DUES	\$ 100,00	
04-15-14	GARFIELD ELEMENTARY SCHOOL PTO	176 GARFIELD AUE REVERE, MA 02151	FIELD DAY DONATION	\$100,00	
05-12-14	GARFIELD MIDDLE SCHOOL PTD	176 GARFIELD AVE. REVERE, MA 02151	FIELD DAY DONATION	\$ 100.00	
01-27-14 thru 11-17-14	INDEPENDENT NEWSPAPER GROUP, LLC	385 BROADWAY REVERE, MA 02151	POLITICAL ADVERTISING	\$ 456.55	
04-08-14	POINT OF PINES YACHT CLUB	28 RICE AVE. REVERE, MA 02151	DONATION / AD 100TH ANNIVERSARY	\$125.00	
06-23-14	REVERE BEACH PARTNERSHIP, INC.	79 THURLOW AUE. REVERE, MA 02151	DONATION - NATIONAL SAND SCULPTING FESTIVAL	\$150.00	
04-23-14 thru 12-04-14	REVERE CHAMBER OF COMMERCE	108 BEACH ST. REVERE, MA 02151	DUES; FUNDRAISER(S) GOLF TOURNAMENT; DINNER-INSTALLATION OF OFFICERS	\$465,00	
09-03-14	REVERE HIGH SCHOOL FOOTBALL PARENTS CLUB	P.O. Box 46 REVERE, MA 02151	DONATION/AD	\$100.00	
01-14-14	REVERE LITTLE LEAGUE	P.O. BOX 96 REVERE, MA 02151	OUTFIELD FENCE SIGN @ MOMACKIN FIELD	\$150.00	
08-25-14	REVERE TORNADO FUND	CITY HALL BROADWAY REVERE, MA 02151	DONARIOD	\$100.00	
		Line 12: Total Expenditures over \$50 (or listed above)		continued next sheet	
		Line 13: Total Expenditures \$50	and under* (not listed above)	continued next sheet	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD CENTINUED WEXT Sheet				next sheet	
If you have itemized expenditures of \$50 and under include them in line 12. I ine 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 above.

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COMMITTEE FOR IKA NOVOSELJAJ PAGE HA

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

eport 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	
10-20-14 and 11-13-14	SEACORST HIGH SCHOOL	15 EVERARD STREET REVERE, MA 02151	DONATION AND YEARBOOK AD	\$ 55.00	
01-13-14	U.S. Post Office	200 BROADWAY REVERE, MA 02151	POSTAGE POLITICAL MAILINGS	\$368.00	
		Line 12: Total Expenditures over \$50 (or listed above)		\$2,819.55	
	Line 13: Total Expenditures \$50 and under* (not listed above)			722.00	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				3,541.55	

^{*} 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

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)		Ø
		Line 16: In-Kind Contributions \$50 & under (not listed above)		Ø
Enter on page 1 line 6 →		Line 17: TOTAL IN-KIND CONTRIBUTIONS		Ø

^{*} 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
12-09-14 and 12-15-14	U.S. Post Office	300 BROADWAY REVERE, MA 02151	POSTAGE FOR HOLIDAY CARDS	\$294.00
				X
	Enter on page 1, line $7 \rightarrow$	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	\$ 294.00