

Form CPF M 102: Campaign Finance Report **Municipal Form** Office of Campaign and Political Finance OMMISSIONERS

15 JAN 26 PM 1:00

Of Massachusetts	***	F	ile with: City or Town Clerk	or Election Commission	
Fill in Reporting Period dates: Beginning Date: 01/2	01/2014	Ending D	REVE NTENA		
Type of Report: (Check one) Bth day preceding preliminary Sth day preceding election	□ 30 0	lay after election		dissolution	
Stacey A Rizzo	Com	mittee to Elect Stacey A	A Rizzo		
Candidate Full Name (if applicable)		Committee Name			
Revere School Committee		John J Rizzo			
Office Sought and District		Name of Committee Treasurer			
609 Mountain Ave. Revere, MA 02151		609 Mountain Ave. Revere, MA 02151			
Residential Address		Cor	mmittee Mailing Address		
Telephone Number (optional): 7812891724	Telepl	Telephone Number (optional): 7812891724		724	
SUMMARY BALAN	NCE INF	ORMATION:			
Line 1: Ending Balance from previous report		270.49		9	
Line 2: Total receipts this period (page 3, line	11)	555.00			
Line 3: Subtotal (line 1 plus line 2)	825.49		9		
Line 4: Total expenditures this period (page 5,	line 14)		792.00		
Line 5: Ending Balance (line 3 minus line 4)			33.49	<u> </u>	
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: TD Bank					
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the activity, including all contributions, loans, receipts, expenditures, disbursements, in-ki finance activity of all persons acting under the authority or on behalf of this committee Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check is a carrier to the committee of the committee of 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 report Candidate without Committee OR Candidate with independent activity filing I certify that I have examined this report including attached schedules and it is, to finance activity, including contributions, loans, receipts, expenditures, disbursem campaign finance activity of all persons acting under the authority or on behalf of the committee of the committee of the committee of the committee in incurred any liabilities nor made any expenditures on my behalf during this report including attached schedules and it is, to finance activity, including contributions, loans, receipts, expenditures, disbursem campaign finance activity of all persons acting under the authority or on behalf of the committee of t	I box only) the best of n accordance ting period. g separate route the best of n ents, in-kind	ons and liabilities for this with the requirements of "Treasurer's "Ty knowledge and belief, with the requirements of "port by knowledge and belief, contributions and liabilities	reporting period and represent of M.G.L. c. 55. signature) Date: 01. a true and complete statement M.G.L. c. 55. I have not receive a true and complete statement es for this reporting period and requirements of M.G.L. c. 55.	of all campaign finance ived any contributions, of all campaign finance ived any contributions,	
Signed under the penalties of perjury:	you	(Candidate's	signature) Date: 01	1112010	

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)	
02/14/2014	John J Rizzo 609 Mountain Ave. Revere, MA 02151	300.00	Cad-cam Designer Raytheon	
Line 9: Total Rece	cipts over \$50 (or listed above)	300.00		
Line 10: Total Receipts \$50 and under* (not listed above)		255.00		
Line 11: TOTAL	RECEIPTS IN THE PERIOD	555.00	← 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 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.)

	To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
02/11/2014	Go Fund via We Pay	On line	Donation	50.00	
04/12/2014	U.S. Postal		Stamps	147.00	
11/17/2014	Castles		Fundraiser Tickets	35.00	
10/12/2014	Donors Choose	On line	Donation	50.00	
	i)	Line 12: Total Expenditure	es over \$50 (or listed above)	282.00	
		Line 13: Total Expenditures \$50 and under* (not listed above)		510.00	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPEN	DITURES IN THE PERIOD	792.00	

^{*} 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 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
9/2009	Stacey A Rizzo	609 Mountain Ave. Revere, MA 02151	Loan	\$500.00
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL) \$500.00				