



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

BOARD OF
ELECTION
COMMISSIONERS

Office of Campaign and Political Finance

13 NOV 19 AM 8:48

File with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/13 Ending Date: 10/28/13

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

George Rotundo
Candidate Full Name (if applicable)

Councilor at Large
Office Sought and District

45 Hunn St Revere
Residential Address

Telephone Number (optional): _____

CTE George Rotundo
Committee Name

Mark Rotundo
Name of Committee Treasurer

P.O. Box 128 Revere MA
Committee Mailing Address

Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0</u>
Line 2: Total receipts this period (page 3, line 11)	<u>7600</u>
Line 3: Subtotal (line 1 plus line 2)	<u>7600</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>7392</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>208</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>2400</u>
Line 8: Name of bank(s) used:	<u>EAST BOSTON SAVINGS</u>

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: Mark Rotundo (Treasurer's signature) Date: 10/15/13

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) 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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5/20/13	DAVID MUDICA 11 ELIZABETH RD MARBLEHEAD	250	Developer
5/20/13	Jamie Russo P.O. Box 365 Revere	500	Developer
5/20/13	Charles Lightbody 55 W. Marshall St Revere	500	Developer
5/20/13	Dan Passacantilli 328 Pond St Boston	500	Developer
5/20/13	Nor C 750 Dorchester Ave Boston	500	union
5/20/13	Local 22 LABOUR Highland Ave, Malden	250	union
5/20/13	Local 218 Carpenters Salem St Medford	500	union
5/20/13	Pipe fitter Local 537 35 Travis Allston MA	250	union
5/20/13	UFCW 1445 30 Sturgis Way Dedham	100	union
5/20/13	Plumber Local 12 1240 MASS AVE, Dorchester	500	union
5/20/13	Robert Georges P.O. Box 493 Byfield MA	100	Developer
5/20/13	Carmen Mathuber 7 Foster St Revere MA	50	Developer
Line 9: Total Receipts over \$50 (or listed above)		4000	
Line 10: Total Receipts \$50 and under* (not listed above)		—	
Line 11: TOTAL RECEIPTS IN THE PERIOD		4000	← 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

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(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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Feb 4, 2013	George Rotundo 45 Hamon St Revere	1400	RW
5/20/13	Atty Gerry Dambrosio Proctor Ave Revere	100	Attv
5/20/13	Sarah Tech 16 Proctor St Swampscott	100	owner MacDonald
5/20/13	Joe Intornaceo 23 S. Hancock Revere	250	Revere Police
5/20/13	Stanley DeMartino Squire Rd Revere	100	Developer
5/20/13	Domenich Bicham 4 country lane Topsham	100	Insurance Broker
5/20/13	Tony Brando 9 Ocean Ave Revere	100	Retired
8/2/13	George Rotundo 45 Hamon St	1400	RW

Line 9: Total Receipts over \$50 (or listed above)	3600
Line 10: Total Receipts \$50 and under* (not listed above)	—
Line 11: TOTAL RECEIPTS IN THE PERIOD	3600

← 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
FEB 4, 2013	Madison Printing	Rt 107 Revere	Literature	31.00
March 19, 2013	Connolly Printing	17B Gill St Woburn, MA	Sign	459
Oct 15, 2013	Madison Printing	Rt 107 Revere	Mailers	995
Jan 10, 2013	USPS	Broadway Revere MA	Stamp	510.
Aug 14, 2013	Connolly Printing	17B Gill St Sign Woburn	Signs	460
6/31/13	Windsor Inn	Malden MA	Storage	320
Aug 14, 2013	Home Depot	Chelsea MA	Wood, zip tie STAPLE, TAPE	68.00
5/20/13	Antonia Revere Beach	Revere Beach Blvd	Fundraiser	500
4/19/13	Build A Sign	11525 Stonelawn Dr Austin Texas	Signs	280
8/14/13	MADISON PRINTING	Rt 107 Revere MA	Letter head	300
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				6492

Enter on page 1, line 4 →

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized 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)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				

Enter on page 1, line 6 →

* 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.