

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report Municipal Form COMMISSIONERS

Office of Campaign and Political Finance
17 OCT 20 AM 10: 14

File with City of Fown Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: Finding Date: Ending Date:
 Γype of Report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution
Candidate Full Name (if applicable) WARD + Caucilla Office Sought and District 175 Ridle Rd. Residential Address E-mail: Committee to Clect help Russe (Mail) Phone # (optional): 181-920-9787
SUMMARY BALANCE INFORMATION:
Line 1: Ending Balance from previous report
Line 2: Total receipts this period (page 3, line 11)
Line 3: Subtotal (line 1 plus line 2)
Line 4: Total expenditures this period (page 5, line 14)
Line 5: Ending Balance (line 3 minus line 4)
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: People's United Bank
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, disbursaments, 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: (Treasurer's signature) Date: Organizate 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 opposable of this committee in accordance with the requirements of M.G.L. c. 55.

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 Date Received (alphabetical listing required) Amount			Occupation & Employer (for contributions of \$200 or more)		
Date Received	Philip Russo	- I I I I I I I I I I I I I I I I I I I			
9.19.17	175 Rioge Rd. Reverse	#250.ºº	Busivers owner.		
10.6.17	Russel Flooring & Ist.	\$2500.00	Busivess/Acorcovery Co.		
10-18-17	Demetra Digregorio 2007, agera Revere MA	#100			
			·		
	•				
Line 9: Total Receipts over \$50 (or listed above)					
Line 10: Total Receipts \$50 and under* (not listed above)					
Line 11: TOTAL	RECEIPTS IN THE PERIOD	285U.0U	← 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 (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
:	•		
		!	

ine 9: Total Rece	ipts over \$50 (or listed above)		
ine 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD	•	← 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.)

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		
10-6-17	Supersport VST, Inc	910 EAStern Are MAIden, MA 02148	Banners	# 225		
10-6-17	Madison acup, Inc.	1330 Broadway Revere MA 02151	Printing Ads.	2362.57		
		Line 12: Total Expenditures ov	rer \$50 (or listed above)	\$ 2527.59		
		Line 13: Total Expenditures \$5				
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	\$2527.59		

^{*} 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: EXPENDITURES (continued)

	To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
	•				
		1	1		

	Line 12: Expenditures over \$50 (or listed above)				
Line 13: Expenditures \$50 and under* (not listed above)					
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD					
Enter on page 1, time 4 -> Lime 14. TOTAL EAST ENDITORED IN THE ABOVE					

^{*} 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 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 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value	
			100		
		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
		_		-
		1		
	D. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Line 18: TOTAL OUTSTAN	DING LIARILITIES (ALL)	
	Enter on page 1, line /	Line 10, 10 IAL 00 ISTAN	(10-11)	Page 7