

Form CPF M 102: Campaign Finance Report Municipal Form COMMISSIONE COMMISSIONE

Office of Campaign and Political Finance

12 JAN 18 AM 10: 00

Fill in Reporting Period dates: Beginning Date:	Place 12/31/11 Ending Date: 12/31/11			
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election [30 day after election vear-end report dissolution			
Robert J. HAAS Jr Candidate Full Name (if applicable)	COMM TO ElecT TSoberT THANS TO Committee Name			
Councillor AT LATGE Office Sought and District	TVANTA HAAS Name of Committee Treasurer			
155 Fenley ST Revere MA 02157 Residential Address	135 Fewley ST Trevere MAOSISI Committee Mailing Address			
Telephone Number (optional): 781-284-5039	Telephone Number (optional): 781-284-5039			
SUMMARY BALANCI	E INFORMATION:			
Line 1: Ending Balance from previous report	18,844,61			
Line 2: Total receipts this period (page 3, line 11)	1,725.00			
Line 3: Subtotal (line 1 plus line 2)	20,569.67			
Line 4: Total expenditures this period (page 5, line	14) 3,504.57			
Line 5: Ending Balance (line 3 minus line 4)	17.065 10			
Line 6: Total in-kind contributions this period (pag	e 6) — — — — — — — — — — — — — — — — — —			
Line 7: Total (all) outstanding liabilities (page 7)	8			
Line 8: Name of bank(s) used: TDBANK	411 Broadw AT Pevere 0215X			
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: 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 I certify that I have examined this report including attached schedules and it is, to the befinance activity, including contributions, loans, receipts, expenditures, disbursements, i campaign finance activity of all persons acting under the authority or on behalf of this contributions.	est of my knowledge and belief, a true and complete statement of all campaign n-kind contributions and liabilities for this reporting period and represents the			
Signed under the penalties of perjury:	(Candidate's signature) Date: 1/18/12			

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 ar committee name and a nage number on each nage.)

Date Received	Please include your committee name and a pa Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(mpme s 1		
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	7		
Line 9: Total Rec	eipts over \$50 (or listed above)		
ine 10: Total Rec	ceipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

SCHEDULE B: Receipts

	Name	Residential Address	Occupation/Employer	Amount
11/1/2011	Caruso, Jr., Ralph	320 Charger Street, Revere, MA 02151	Principal, Caruso Const.	\$300.00
10/25/2011	Costa, Ann Marie	112 Stevens Street, Revere, MA 02151		\$75.00
10/29/2011	Demartinis, Stanley C.	Demartinis, Stanley C. 11 Wymon Way, Lynnfield, MA 0l940	Developer	\$500.00
10/24/2011	lan Realty Trust	1605 North Shore Road, Revere, MA 02151 Principal, Atlas Automotive	Principal, Atlas Automotive	\$500.00
10/11/2011	Marcotte, James	227 Court Road, Winthrop, MA 02152	Principal, Select Car	\$250.00
10/21/2011	Scally, William C.	274 Endicott Avenue, Revere, MA 02151		\$100.00
		Total receipts over \$50.00		\$1,725.00
		Total receipts \$50.00 and under		\$0.00
		Total receipts in this period		\$1,725.00

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
Date Faid	(aiphabetear issuig)	Audress	Turpose of Expenditure	- Amount
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		Line 12: Total Expenditures over	er \$50 (or listed above)	
		Line 13: Total Expenditures \$50	and under* (not listed above)	
	Enter on page 1 line 4 ->	Line 14: TOTAL EXPENDIT	URES 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 above.

Page 4

SCHEDULE B: EXPENDITURES

Date	To Whom Paid	Address	Purpose	Amount
11/7/2011	Crest Printing Co., Inc.	449 Eastern Avenue, Chelsea, MA 02150	Printing	\$228.44
11/7/2011	ING, LLC	385 Broadway, Revere, MA 02151	Ad	\$401.00
11/28/2011 ING, LLC	ING, LLC	385 Broadway, Revere, MA 02151	Ad	\$245.00
12/17/2011	ING, LLC	385 Broadway, Revere, MA 02151	Ad	\$104.00
12/17/2011	Mario's Restaurant	347 Chelsea Street, East Boston, MA 02128	Food/Hall	\$339.15
11/5/2011	Postmaster Boston	300 Broadway, Revere, MA 02151	Postage	\$132.00
11/7/2011	Revere Beautification Comm.	P.O. Box 166, Revere, MA 02151	Donation	\$200.00
12/30/2011	Revere Inaugural Fund	281 Broadway, Revere, MA 02151	Inaugural Fund	\$200.00
11/5/2011	RSCHP	108 Beach Street, Revere, MA 02151	Donation	\$100.00
11/22/2011	Stop & Shop	540 Squire Road, Revere, MA 02151	Gift Certificates	\$100.00
11/12/2011	Sylvia's Haven Inc.	7 Foster Street, Revere, MA 02151	Donation	\$75.00
11/7/2011	The Advocate Newspaper	573 Broadway, Everett, MA 02149	Ad	\$610.00
12/17/2011	The Hundred Club of Mass.	17 Gloucester Street, Boston, MA 02115	Dues	\$250.00

Disbursements over \$50.00	\$2,984.59
Disbursements under \$50.00	\$519.98
Total disbursements in this period	\$3,504.57

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
Ty Table		Line 15: In-Kind Contributions	over \$50 (or listed above)	0
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	6
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	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.

Page 6

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
	A PAGE STORY			
		Line 18: TOTAL OUTSTAND		