

# Form CPF M 102: Campaign Finance Report Municipal Form BOARD OF

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commiss

Date: 12/31/241

| Fill in Reporting Period dates:   | Beginning Date:                   | 11/24          | Ending Date: 12/3//34  |             |
|---|-----------------------------------|----------------|--|-------------|
| Type of Report: (Check one)  8th day preceding preliminary  | 38th day preceding election       | □ 30 day       | after election 🗖 year-end report   | dissolution |
| Toanne WcKenn A Candidate Full Name (i  Ward one - City Coo  Office Sought and  830 Winthrop Ave - N  Residential Add  E-mail: McKindi at adl. Co  Phone #: 617-697-7596  | District Revere MA 07151 dress    |                | Committee Name  hael A Fercante  Name of Committee Treasurer  Burbank Street - Revene  Committee Mailing Address | 7 MA 0218   |
|   | SUMMARY BALAN                     | NCE INFO       | RMATION:   |             |
| Line 1: Ending Balanc   | e from previous report            |                | 2053399  |             |
| Line 2: Total receipts t  | this period (page 3, line 12)     |                | 2000 -   |             |
| Line 3: Subtotal (line 1  | l plus line 2)                    |                | 22533.99   |             |
| Line 4: Total expendit  | ures this period (page 5, line 1  | 15)            | 2753.64  |             |
| Line 5: Ending Balanc   | e (line 3 minus line 4)           |                | 19 780.35  |             |
| Line 6: Total in-kind co  | ontributions this period (page    | 6, line 18)    | 0  |             |
| Line 7: Total (all) outst   | tanding liabilities (page 7, line | e 19)          | 0  |             |
| Line 8: Total out-of-poo  | cket expenses this period (pag    | ge 8, line 22) | 0  |             |
|   | s) used: Citizans Bo              |                |  |             |
| 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:    Market   Committee   Committee |                                   |                |  |             |
| FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)  |                                   |                |  |             |
| Candidate with 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 that are not otherwise disclosed in this report.   |                                   |                |  |             |
| Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.   |                                   |                |  |             |
| Signed under the penalties of perjury:  | Joanne Ma                         | Ken            |  | /ib/25      |

#### SCHEDULE A: KECEIPIS

A.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar ear. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor 50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and ecords of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions eccived. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities.

\*\*ttach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

| Date Received | Name and Residential Address (alphabetical listing required)         | Amount | Occupation & Employer (for contributions of \$200 or more) |
|---------------|--|--------|--|
| 3/13/124      | Lov markaxis 36 Olean Ave - Lynn, MA 01902                           | 500    | Self-Employed<br>Livenway Associates Group                 |
| s/aila4       | Mass + Northern England Laborers 7 Laborers way - Hopkinton MA 01748 | 500 -  | UNION  |
| 3/21/24       | Andrew + Daniel Sica<br>335 Lee Burbone Hug-Revers, wa               | 1000-  | SCIF- EmployED<br>Communicate Auto Body                    |
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### SCHEDULE A: RECEIPTS (continued)

| Date Received   | Name and Residential Address (alphabetical listing required) | Amount   | Occupation & Employer (for contributions of \$200 or more)   |
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| - 20  |  | 2-913  |  |
| Line 10: Total Receipts over \$50 (or listed above)       |  | * If you have itemized receipts of \$50 and<br>under, include them in line 10. Line 11 |  |
| Line 11: Total Receipts \$50 and under (not listed above) |  | should include only those receipts not itemized above.                                 |  |
| Line 12: TOTAL  | RECEIPTS IN THE PERIOD                                       | ← Enter on page 1, line 2  |  |

### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

| Date Paid | To Whom Paid (alphabetical listing)      | Address   | Purpose of Expenditure                | Amount |
|-----------|--|---|---------------------------------------|--------|
| 6/3/24    | Aovocate neuspoper                       | 573 Broadway EVENETT, MA 02149                      | Aov                                   | 135-   |
| 7/4/24    | Aprocate newspaper                       | 573 Broadway Everettima 02149                       | Aou                                   | 65-    |
| 5/13/24   | Beachment Veterans<br>Memorial School    | 15 Everoso STTEET REVIEW, MA ODIS!                  | Donation                              | 100-   |
| 10/26/24  | Bruce Singer                             | 15 Bellingham Ave<br>Rever, MA Odisi                | Donation                              | 100-   |
| 4/20/24   | Garfielo Mivole<br>School PTO            | 176 Garfield Ave<br>Revice, MA 07151                | Donation                              | 100 -  |
| 12/11/24  | GINA NOFTLE'S FIGHT<br>Against Rake Care | PO BOX 121270<br>815 E SWEET<br>San Diego, (A 92101 | Donation                              | 100 -  |
| 1/20/24   | GSP Tax Service inc                      | Revise, MA OZISI                                    | Accounting                            | 100-   |
| 9/3/24    | Help Ryans Family                        | 860S Scotta MONICA BIVD<br>West Hollywood: CA 90069 | Ponation                              | 100 -  |
| Slielay   | HIII Elementary School                   | SI Park Ave<br>Reveres MA ODISI                     | Donetion                              | 100    |
| 12/12/24  | marshall's of<br>Revere                  | Reveren Mx 02151                                    | TOY Prive T<br>Somor Christmas Ropple | 53-    |
| 4116/24   | Pavi Revere<br>Innovation School         | 395 Revole Street<br>Revolet MA ODIST               | Donation                              | 100 -  |
|           | Priscilla Nickerson  Memorial Scholoship | Reveren MA ODIS!                                    | Donation                              | 100 -  |
| 1414124   | Renae Huettel Concer Fundraiser          |   | Medical Bills                         | 100-   |

## SCHEDULE B: EXPENDITURES (continued)

| Date Paid   | To Whom Paid (alphabetical listing)      | Address   | Purpose of Expenditure | Amount |
|---|--|---|------------------------|--------|
| 7/4/24  | Revere Beach Partnership<br>Samo Castles |   | Denation               | 150-   |
| 1/22/24   | Revole Journal Newspaper                 | 385 Broadway Revere MA OFISI                            | Aov                    | 144 -  |
| 7/4/24  | Revore Journal News paper                | 385 Broadway Revive, MA OFISI                           | ADV                    | 70-    |
| 6/25/24   | Robert McKenna                           | Reverei MA ODIS!  | Supplies               | 173 -  |
| 714/24  | Row Row in<br>Revire                     | 20 Reynolds AVE<br>EVERETTI MA OH49                     | Donation               | 100-   |
| alilau  | US Postal<br>Service                     | 5 michaelsmail<br>Winghroping OLIST                     | Postoge                | 68 -   |
| 10/27/27  | Us Postul<br>Service                     | S michaelis mall<br>Windarop, MA OZISZ                  | Postage                | 73 -   |
| 4/14/24   | the Boston<br>Overnaht walk              | Boston MA 02215   | Donation               | ISO-   |
| 4/16/24   | Whalen School                            | 107 Nowhall Street<br>ROUTE, MA OHSI                    | Donation               | 100 -  |
|   |  |   |                        |        |
|   |  |   |                        |        |
|   |  |   |                        |        |
|   |  |   |                        |        |
| and under, include them in line 13. Line 14                               |  | Line 13: Expenditures over \$50 (or listed above)       |                        | 2281 - |
| should include only those expenditures not itemized above.                |  | Line 14: Expenditures \$50 and under (not listed above) |                        | 472.64 |
| Enter on page 1, line 4 → Line 15: TOTAL EXPENDITURES IN THE PERIOD 2753. |  |   | 2753.64                |        |