



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Rec'd
1/19/25
9:23P

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/24 Ending Date: 12/31/24

Type of Report: (Check one)

8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

Jacqueline Monterroso
Candidate Full Name (if applicable)

Revere School Committee
Office Sought and District

43 Haddon St, Revere, MA 02151
Residential Address

E-mail: _____

Phone #: _____

Committee to Elect Jacqueline Monterroso
Committee Name

Victor Monterroso
Name of Committee Treasurer

43 Haddon St, Revere, MA 02151
Committee Mailing Address

E-mail: _____

Phone #: _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>\$1,295.71</u>
Line 2: Total receipts this period (page 3, line 12)	<u>\$2,050</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$3,345.71</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>\$387.98</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$2,957.73</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>0</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>0</u>
Line 9: Name of bank(s) used:	<u>TD Bank</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: [Signature] (Treasurer's signature) Date: 1/19/25

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: [Signature] (Candidate's signature) Date: 01-19-25

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 10: Total Receipts over \$50 (or listed above)		\$2,000	<i>* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.</i> ← Enter on page 1, line 2
Line 11: Total Receipts \$50 and under (not listed above)		\$50	
Line 12: TOTAL RECEIPTS IN THE PERIOD		\$2,050	

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
1/2/24	Walmart	326 N Broadway Salem, NH 03079	Food for Inauguration Event	\$66
1/16/24	Debora Ortega-Maldonado	290 Lee Ave New Brunswick, NJ	Internship Stipend	\$100
3/4/24	Patricia Hernandez-Beitran	PO Box 661 Mecca, CA 92254	Internship Stipend	\$200
6/13/24	Squarespace	8 clarkson St New York, NY 10014	Website Domain Fee	\$20
7/31/24	Actblue	366 Summer St Somerville, MA 02143	Service Fee	\$1.98

Enter expenditure totals on Page 5

