

# Form CPF M 102: Campaign Finance Report

**Municipal Form** 

BOARD OF ELECTION COMMISSIONERS

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk of Election Commission
Fill in Reporting Period dates: Beginning Date: ////29	P. II. D. J. St. J. J. J.
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election 2	0 day after election  year-end report dissolution
Joanne McKenna	The Committee to Elect Joanne McKenna
COUNCI Capdidate Full Name (if applicable)  COUNCI CAPORT	Michael Fervanta
830 Winthrop Aug Residential Address	330 Winthyop Aw Roule Committee Mailing Address
E-mail: MCK Dindia AOL. COM E-	mail: Mck bindia aol. com
Phone #: 017.097 7596	one#: <u>017 (097 75 96</u>
SUMMARY BALANCE I	NFORMATION:
Line 1: Ending Balance from previous report	19730.35
Line 2: Total receipts this period (page 3, line 12)	35017.01
Line 3: Subtotal (line 1 plus line 2)	54747.36
Line 4: Total expenditures this period (page 5, line 15)	222234
Line 5: Ending Balance (line 3 minus line 4)	32 523 82
Line 6: Total in-kind contributions this period (page 6, line	18)
Line 7: Total (all) outstanding liabilities (page 7, line 19)	-6-
Line 8: Total out-of-pocket expenses this period (page 8, lin	e 22) — — — — — — — — — — — — — — — — — —
Line 9: Name of bank(s) used: C1+12ens BK	
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best of m activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions activity of all persons acting under the authority or on behalf of this committee in according under the penalties of perjury:  Mullaul a function	butions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box onl	у)
Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the best activity, of all persons acting under the authority or on behalf of this committee in accorda incurred any liabilities nor made any expenditures on my behalf during this reporting period.	of my knowledge and belief, a true and complete statement of all campaign finance nce with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the best finance activity, including contributions, loans, receipts, expenditures, disbursements, in-k campaign finance activity of all persons acting under the authority or on behalf of this can Signed under the penalties of perjury:	ind contributions and liabilities for this reporting period and represents the

### 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.)

eport all receipts. I	Please include your committee name and a page		Occupation & Employer
Name and Residential Address  (alphabetical listing required)		Amount	(for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	
01-106	ACT Blue mass	73476	
9/7/25	PO BOX 962017, BOSTON MA	154,10	
	00/76		
1 )	Act Blue mass		
9/21/25	D. D. A CHART BOSTONIMA	480.25	
	PO BOX 962017 P 02196		
	michael + Bruget Accomulo		,
7/13/25	175 WINGEROD PRUM, REVORE, MX	300,-	retired
1(1)	02151		
	Robert + Christine Anderson		
9/8/25	Robert & Chils Vine I was	100-	
91812	GACTYSTAL AUC. Revere MA 02151		·
	Bonn erA		
alulac	Theres & Bagners	100-	
914125	980 WINTHVOR AVE. REVEREI MA OSIS		
11110	VINCENT + Therest Bongsoro	100-	
4/14/25	5 Berkman RDI Rovers, MA	100-	
	oais!		
111.0	Paul + Mary BuonFiglio	200-	retireo
4/14/25	1 35 ESCA ST. REVERENMA	250-	(C) Heb
	02151		
	Pavit Stacy Buon Figlio		BUSINESS OWNER
4/14/25	111	750-	005/11253 010101
11.1100	20 Wing RD, LYNN Fleid, MA		
	Andrew + Josephine Burko		
4/14/25	16 Pier View Ave	100 -	
1114/2	Revere, MA OUS!		
	D. Marie Buchine		
9/8/25	100 Squire PO -UNIT #3	300-	Business owner
110000	Revere MA 02151		
	James + Lynne Coranello	1	
1 01-100	11 Eaton Street	100-	
8/30/25	Revere MA 02151		
	Carpenters Local Union 723 pac 750 Dorchster AVE	250 -	Unian
8/21/25	750 porchate 710	250	
	Baston, MA 02125		
Line 9: Total Re	ceipts over \$50 (or listed above)		
			<b>1</b>
Line 10: Total Re	eceipts \$50 and under* (not listed above)		
			<b>1</b>
Line 11: TOTA	L RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
* If you have itemi	zed receipts of \$50 and under, include them in li	ne 9. Line 10 sho	ould include only those receipts not itemized above.

<sup>\*</sup> If you have itemized receipts of \$50 and under,

	Name and Residential Address	4t	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	(tor contributions of \$200 or More)
3/11/25	Stephen Coruso 3 Tonika Street Proback, MA 01960	250-	Construction owner
41:4/25	Carol Barker + Steven Camerono 34 Winterop PKWY Reversi MA 02151	100-	
4114125	Camelt (ellt 1029 WINKIOD AVE REVEREN MA 02151	100 -	
9/3/25	Brian Chapman 200 Winthrop PKWY Revore, MA ODLS 1	250-	Police officer
6/10/25	Amy Chamberlin 64 Spraque Street Revere, MA 02151	100-	
3/3/25	Mario + Cheryl Chiuccariello 3 Reo Caach Lane Winchesterima 01890	506-	Business owner
4/14/25	June ClarrellA 15 ocean view Ave Reversi MA 0451	100-	
2/25/25	James Cipolleta 5 Fremont Street Wintump, MA 02152	250-	Attorney
9/3/25	Jonathan Cody PO BOX 31 Haverhill, MA 01631	1000-	Business owner
4114125	George + Terry ColellA 17 Keans RD Burlington, MA 01803	100-	
stales	Thomas connolly 42 Lewis AVE WINTERP, MA OUS2	100-	
Slaalas	Joseph Coppolt 337 Sharpners Pono Road No Andover MA 01845	250-	Corwash owner
6/12/29 Cons + General Laborars union 22 35 Highland Ave malden, MA 02148		250-	Union
Line 10: Total Re	Line 10: Total Receipts over \$50 (or listed above)		* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not
	eceipts \$50 and under (not listed above)		itemized above.
Line 12: TOTAL	L RECEIPTS IN THE PERIOD		Enter on page 1, line 2

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
319125	Arthur Croce 10 Crown Shield Street Peaboux, MA 01960	250	retires
4/6135	NICK Daher 375 Broadway Rever, MA 02151	500-	(ealtor
9/4/25	Dicholas Daher 375 Broadway Reveres MA OHS!	200-	realtor
4/14/25	Gerry + Michelle D'Ambrosio 14 Proctor Ave Revere, MA 02151	2000 -	ATTORNEY
4/15/25	Lillion De Flippo 40 new hall Street Reverei MA OSISI	106-	
4/14/25	CTE Bob Deleo Po Box 15 Boston, MA 02137	100-	
4114/25	Robert DeLeo S Eleenor CT Wintarop, MA OLIST	100-	
4/14/25	James DePaulo 849 Revoire Broch PKWY Reveres MA OSISI	100-	(etire)
9/4/25	James DePaulo 849 Revere Beach PKWY Reverein A 02151	100-	retiren
10/6/25	Michael De fasquale 24 Billows Ave Revere, MA Odisi	500-	owner
4/14/25	Victor Dinarello 43 Jornis Street Bevere, MA 02151	100-	
glilas	Robert + Deborah Difasquale 3 A Crystal AVE Reverei MA 02151	200-	(c-ter=0
9/4/25	DILOTENZO RECITY 1037 WINTERPOP AVE REVERZI MA DAGI	100-	
Line 10: Total Rec	eipts over \$50 (or listed above)		* If you have itemized receipts of \$50 and 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

		,	Occupation 9. Employer
Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/18/18	John Festa 360 malden Street Reversi MA 62191	200-	BUSINESS OWNER
9/8/25	John + Jamle FostA 360 moldon Street Revers, MA 02151	250-	Business owner
4/15ləs	Evan Griffith 100 Subbury Street Boston, MA OFFIT	1000-	BUSINES OWNER
9/4/25	RamonA Couffice 901 Loncester AVE Revore MA COISI	106 -	
4lısləS	Arthur Guinasso SIO Revere Beach BLUD Revero, MA ODISI	106 -	
4/14/25	Richard Harnett 17A Roughon Street Reverei MA Odisi	200-	retire0
3/3/25	NOG A Hernandez 39 West Eagle STREET Fast Boston, MA 02128	1060-	Business owner
4/15/15	Robert Impemba JR 394 Shirley Street Wintgrop, MA 62152	500-	Police officer
વાયોઝ્ડ	Robert Impernou JR 394 Shirley Street Winthrop, MA OJISZ	100 -	
4128125	AKlog Leminch 18 Belle Isle AVE Revere MA 02151	206-	Business owner
slalas	Paul + Jonet Laurey 851 WINTELTOP AVE Revere, MA 02151	160-	
3/25/25	Mark Locke 65 Rice Ave Revere, MA ODISI	200-	Plumber Inspected
4114/25	LOU Markakis ISD Lynnway Lynn, MA 01903	200-	Seif-Employen
Line 10: Total Rece	eipts over \$50 (or listed above)		* If you have itemized receipts of \$50 and
Line 11: Total Rece	eipts \$50 and under (not listed above)		under, include them in line 10. Line 11 should include only those receipts not itemized above.
Line 12: TOTAL 1	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4 l1sl2s	mass Brickleyers sso menford street Charleston, MA 02129	250-	Union
914125	Richard + Jane mattuckio 18 Joan Road Med Ford, MA 02155	1000 -	Business Owner
3/16/25	Lianx mc Kenna 1100 Lastrada Lane Daples, FL 3461	300-	(etirop
4/14/25	Robert McGee, JR 11 Carpenter RP Lynnfield, Mx 61940	1600 -	Self-EmployeD.
4/14/25	James + Deburch Mercurio 193 Crescent Ave. Revere MA OFISI	200-	Business owner
914/25	Christian + Michael Mercurio 821 Winterop Aug Revere, MA 02151	100-	
2/26/25	Michael Mercurio 89 Franklin Ave Revere, MA 02151	200-	Lundscoper
9/2/25	Amy monagle 1 Carey Circle HUNIT 403 Revel MA GOISI	100-	
7/30/25	1 Atlantic State Regional Council 750 Dorchester AVE Dorchester MA 02125	506-	Union
7/13/25	Atlantic States Regional 750 Poichester Ave Boston, MA 02125	500-	UNION
6127/25	NE Laborers DISTRICT COUNCIL 7 Laborers Way Hopkington, MA 01748	500 -	Union
4114/25	Daniel + Susan Passacantilli 60 Commercial whore Boston, MA 02110	2060-	Business owner
7/16/25	Pile Drivers Local Union 56 Pac 750 Dorchester AVE Dorchester, MA 02123	150 -	Union
Line 10: Total Rec	eipts over \$50 (or listed above)		* If you have itemized receipts of \$50 and
Line 11: Total Rec	eipts \$50 and under (not listed above)		under, include them in line 10. Line 11 should include only those receipts not itemized above.
Line 12: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Blilas	John J Previte III 89 BOX Water Street Boston, MA 02128	150-	
4114125	James + Dawn Russo Po Box 365 Revery MA 02151	2060 -	BUSINESS OWNER
4/is/25	Lotenzo Russo fo Box 365 Bevere, mx 02191	1000 -	OWNER
9/4/25	Saluatore Russo 715 Summer Street Lynn Field, MA 01940	1000 -	BUSINESS OWNER
3/8/25	Daniel + Andrew SICA 335 Lee Burbonic Hwy Revoceima 62151	1006-	Business owner
4/14/25	Heather Slegel 100 Wintarup PKWY Reverel MA OSISI	100 -	
6/13/25	Lawrence + marianne Sinione 105 Great Pono Road Box Ford, MA 01921	506-	ATTOTOEY
2/26/25	Emanuel + marie Serra 17 A Octon Ave Reverel MA 02151	250 -	retired
1/25/25	Philip Squitieri 201 Crescent Ave Reveres MA 02151	260-	(ctireo
914/25	Larry + Karen thang 6 Hidden Valley RD Lynnfield, MA 61940	2000 -	BUSINESS OWNER
91,125	019a Uritskx 65 Overlook RD Boston, MA 02136	509 -	Developer
4/14/25	Gerardo + Mary VIAllottA SS CLEST AVE Reveres MA 02151	100-	
8/26/25	Geraroo + Mary Vigliotta  GECIST AVE  Revolu. MA Dalsi	100-	
Line 10: Total Reco	eipts over \$50 (or listed above)		* If you have itemized receipts of \$50 and
	eipts \$50 and under (not listed above)		under, include them in line 10. Line 11 should include only those receipts not itemized above.
Line 12: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

Name and Residential Address Occupation & Employer					
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)		
3129125	Michael + Danielle ZacariA 123 Cushman Ave Reveres MA 02151	tustiman ave \$\ 250- \ Action			
9/4/25	Danielle + Michael 2000 ari A 123 Cushmon Ave Rever, MA 02151	250-	Action owner		
7/30/as	marangles Zepas 78 mill Street Miunleton MA 01949	1000-	Developer		
Slaslas	Phillip Zucco 56 Lupine Street no Andover, MA 01845	200-	Worker		
·					
Line 10: Total Rece	eipts over \$50 (or listed above)	3292401	* If you have itemized receipts of \$50 and		
			under, include them in line 10. Line 11 should include only those receipts not itemized above.		
Line 12: TOTAL	RECEIPTS IN THE PERIOD	35017.01	← 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.

	To Whom Paid	Address	Purpose of Expenditure	Amount
Date Paid	(alphabetical listing)	S73 Bradway	Turpose of Expenditure	T T T
4/10/25	Aprocate Newspaper	EVERTSI MA 02149	AD	165 -
Slailas	Anvocate newspaper	573 Broadway EVELETT, MA 02149	AD	75~
sloslas	ADVOCATE NEWSPAPER	573 Broaduay EVERETI MA 62149	AV	75
chohs	Advocate newspaper	573 Broadway  Everett, MA 02149	AO	75 -
8/30/25	Aprocote newspaper	573 Broadway  Everett, MA 62149	AO	75-
10/1/25	Abrocate newspaper	573 Broadway GVECETT, MA 02149	AO	1125 -
4/30/25	Beachment Memorial School PTO	15 Everaro ST Reveren MA 02151	Donation	100 -
10/8/25	Carmella Cella	Reveren MA ODISI	Phone Caller	100 -
4/24/25	Chamber of Commerce	REVERS. MA 02151	AD	300 -
2/3/25	CK Strageries Political Consultants	Boston, MA 02108	Consultant	500 -
4/14/25	De mainois Restaurant	14 maiden ST Revore, MA 02151	Food For FunuraiseR	1608.45
9/24/25	Difarma Restaurant	REVERENMA OLISI	Lunch With Campaign Manager	81.85
10/14/25	Facebook	Mento Park, CA 94025	Aos	719 —

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
4/20/25	Garfield School	15 Everaro ST	Donation	100 -
7120125	PTO	Reverei MA 02151	Con the the	
	GOFUND ME	1017 Middleflan RD	Donation	100-
6/20/25		Redwood, CA 94063	Dongtion	[ [ [ ]
	Haymorters For Hope	100 North Wash ST	Donation	100 -
8/16/25	for concer	Bostoni MA 02114	DONATION	
Jacks	Lincoin School	68 TUCKERMON ST	Donation	150-
1/28/25	PTA Fundraiser	ROVERDI MA ODISI	DON & HON	750
inte loc	LINDA Fabiano	23 Dolphin Ave	phone caller	100-
10/6/25		Reverer MA 02151	p   long = cave	
	Luigis	616 WINTHYOP AVE	Food	371.IS
9/2/25		Revere, MA 02151	1000	3,7.10
(lacks	MISSION ON the	400 Olean Ave	Lunch with	7356
6/24/25	Beach	Reverei MA GZISI	Campaian manager	17350
	New Bridge	650 wash ST	LUNCA WITH	69.40
8/2/85	CaFe	Chalsea, MA 02150	Campaign monages	<i>B</i> 1. 10
	Dortarup	919 WINTERPOP AVE	Signs + Stickers	1426
3114/25	Printing	Revoces MA 02151		1525 -
	DOMANUP	919 WINTAROP AVE	.0 1.0	303-
4/4/25	Printing	Reverei MA 02151	Printing	303
	Dorthop	919 wintarop Ave	market Contract	2000 -
10/2/25	Printing	Revover MA 02151	Mailers + postage	2900 -
	Paul Rovere	395 Revere ST		100-
4/20/25	School PTO	Revores MA ODIS!	Donation	100
	Revere Arabic	11 Burley ST.	D	100-
3/12/25	Community	Ruslindale, MA 02131	Ponation	
•	ve itemized expenditures of \$50	Line 13: Expenditures over \$50	(or listed above)	
and under, include them in line 13. Line 14 should include only those expenditures not itemized above.		Line 14: Expenditures \$50 and	under (not listed above)	
•	Enter on page 1, line 4 →	Line 15: TOTAL EXPENDIT	URES IN THE PERIOD	

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
glals	Revere Arabic Community	276 Fenno ST Reverei MA GDISI	Donation	100-
7/16/25	Revere Beach Partnership	ISO BEACH ST REVOID MA 02151	Donation	150-
4/4/25	Ravere Journal	385 Broadway Reversi MA 02151	AD	220 -
4/22/25	Revere. Journal	385 Broadway Reverer MA 02151	AO	75-
8/30/25	Revere Journal	385 Broadway Reversing Odis!	AD	140 -
10/8/25	Revere Journal	385 Broadway Revose (MA ODIS!	AD	365-
Iolislas	Revere Journal	385 Broadway Revorer MA 02151	AD	636-
619125	Revere Karate Interschool	351 Revoie ST Revoie MA OHSI	Donation	150 -
9/26/25	Revere Karate Tournament	Revoser MA 02131	Donation	250 -
1/26/25	Robert McKenna	Reverei MA 02151	Slans t Stickers	200-
Sliolas	Row Row Row In Revere	543 north Shore RD Revores MA 02151	Donation	100-
4/17/25	SBA middle School PTO	Reverei MA OZISI	Donation	100-
9(10)29	Sofistach	121 Broadway. Revere, MA OJISI	Political Signs	1134.75
and under, in	re itemized expenditures of \$50 noclude them in line 13. Line 14 nde only those expenditures not itemized above.	Line 13: Expenditures over \$50 Line 14: Expenditures \$50 and		
	Enter on page 1, line 4 →	Line 15: TOTAL EXPENDIT	URES IN THE PERIOD	

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
१८/२/३५	Souno + Vision media	372 Squire RD Revere, MA 02151	Campaian Video	2260 -
816125	St mary's Church	670 WOSH AVE REVERDI MA GLISI	Donation	60-
6/18/25	the Serino Family	SO Carlson ST Revole, Mx Oalsl	Donation	100-
4/14/25	Torretta's Bakery	General MA ODIS!	Cake For Fundalsar	120-
213/25	USPS	5 Michaels mail Wintamp, MA 02152	Postage	73-
41,125	USPS	5 michaels mall Winterpp MA 02152	Postoge	73-
8/2/25	USPS	300 Broadway Revere, MA U2151	Postage	78 -
8125125	USPS	300 Broadway Revose, MA 02151	Postoge	234-
8lanlas	VSPS	300 Broadway Revere MA 0451	Postage	156-
9/2/25	USPS	Revere, MA 02151	Pastage	78-
9/9/25	USPS	Revere, MA 62151	Postoge	78 -
312125	VISTA PrINT	175 WYMAN ST Wartham, MA 02451	Invitations	16259
7/7/25	VISTA PRINT	275 WYMON ST WALTHAM, MA 024S/	Caros	366.43
* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.  Line 13: Expenditures over \$50 (or listed above)  Line 14: Expenditures \$50 and under (not listed above)				
Enter on page 1, line 4 → Line 15: TOTAL EXPENDITURES IN THE PERIOD				

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/4/25	VIVI Tapas RestauranT	21 Revera Beach BIVD Revera, MA 02151	Food For Funoraiser	3732.40
and under, include them in line 13. Line 14		Line 13: Expenditures over \$50 (or listed above)  Line 14: Expenditures \$50 and under (not listed above)		
			22 22354	

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

<sup>\*</sup> 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 the outstanding balance, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
		NIA		
				·
·				
	Enter on page 1, line 7 →	Line 19: TOTAL OUTSTAND	OING LIABILITIES (ALL)	0

#### SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

	Name and Address of Vendor		T
Date Paid	(alphabetical listing required)	Amount	Purpose of Expenditure
,			
:			
	NI	+	
·			
		,	
Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50		* If you have out-of-pocket expenses of \$50	
(of fisted above)			and under, include them in line 20. Line 21
under (not listed abov	ne)	0	should include only those expenditures not itemized above.
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD			Enter on page 1, line 8