Form CPF M 102: Campaign Finance Report
Municipal Form

Office of Campaign and Political Finance

Commonwealth of Massachusetts

BOARD OF ELECTION COMMISSIONERS

File with: City or Town Clerk or Election Commission

2025 OCT 27 PM 1:25

REVERE, MA.

Fill in Reporting Period dates: Beginning Date: 1/1/2025 Ending Date: 10-27-2025

Type of Report: (Check one)

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

Wayne D. Rose
Candidate Full Name (if applicable)

Councilor at large
Office Sought and District

360 Revere St.
Residential Address

E-mail: dolphin122961@aol.com

Phone #: 781-823-9560

Committee to elect Wayne Rose
Committee Name

Sherry Rose
Name of Committee Treasurer

300 Rerere St.
Committee Mailing Address

E-mail: dolphin122961@aol.com

Phone #: 781-823-9071

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	-0-	
Line 2: Total receipts this period (page 3, line 12)	1,965.00	
Line 3: Subtotal (line 1 plus line 2)	1,965.00	
Line 4: Total expenditures this period (page 5, line 15)	998.95	
Line 5: Ending Balance (line 3 minus line 4)	1,160.95	SR
Line 6: Total in-kind contributions this period (page 6, line 18)	—	
Line 7: Total (all) outstanding liabilities (page 7, line 19)	—	
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	443.75	SR
Line 9: Name of bank(s) used:	Santander 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, 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: Sherry Rose (Treasurer's signature) Date: 10-27-25

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: Wayne Rose (Candidate's signature) Date: 10-27-25

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)
10/15	Peter Martino Winthrop ma.	50 00	
10/15	Cynthia Baumann Rand St. Revere	100 00	
10/15	Rocco Falzone Toscano Ave	100 00	
10/15	Maria Cutler Breedens lane	50 00	
10/15	Niko + Jessica Kostopolus newly wed	500 00	Mills Ave. Revere
10/15	James Rose Colonial Rd.	100 00	
10/15	Dennis Orlandino Saugus	100 00	
10/25	Steven Ciambelli	200 00	lynnfield ma
10/19	Mary Mahoney	100 00	

Line 9: Total Receipts over $50 (or listed above)	1,300 00
Line 10: Total Receipts $50 and under* (not listed above)	165.00
Line 11: TOTAL RECEIPTS IN THE PERIOD	1465 00 ← 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)
	Peter Moldonado	20.00	
	James Armstrong	25.00	
	Paula Barton on line donation	50.00	
	Roberto Tobalino on line donation	50.00	
	Jose montes	20.00	

Line 10: Total Receipts over $50 (or listed above)	1,300	** 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 11: Total Receipts $50 and under (not listed above)	165.00	
Line 12: TOTAL RECEIPTS IN THE PERIOD	1,965.00	← 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
10/20	Revere Journal	Revere	Ad	180.00
10/20	Advocate	Everett	Ad	672.00
9/29	Print Boston	East Boston	Card Stock	190.00
10/25	Dunkin Donuts	Revere	coffee sign holders	46.95
10/20	Revere Journal	Revere	Banner	162.00

Enter expenditure totals on Page 5

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

Line 15: In-Kind Contributions over $50 (or listed above)	
Line 16: In-Kind Contributions $50 & under (not listed above)	
Line 17: TOTAL IN-KIND CONTRIBUTIONS	

Enter on page 1, line 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.

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

Enter on page 1, line 7 → **Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)**

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.*

Date Paid	Name and Address of Vendor (alphabetical listing required)	Amount	Purpose of Expenditure
9/22	Print Boston	358.75	Signs
10/15	Iuberto's	85.00	CAKE for time

Line 20: Total Itemized Out-Of-Pocket Expenditures Over $50 (or listed above)	443.75	** If you have out-of-pocket expenses of $50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.*
Line 21: Total Unitemized Out-Of-Pocket Expenditures $50 and under (not listed above)	—	
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD	443.75	← Enter on page 1, line 8

*Schedule E is not for ballot question committees