

# Form CPF M 102: Campaign Finance Report Municipal Form 2023 COT 30 PM 6 53 Office of Campaign and Political Finance

Commonwealth of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 9/12	2/23 Ending Date: 10/20/23
Type of Report: (Check one)  ☐ 8th day preceding preliminary	30 day after election  year-end report dissolution
Candidate Full Name (if applicable)  Wash 4 City Cancol  Office Sought and District  IS Sewell St. Revere MA 03151  Residential Address  E-mail: JJStama Combol Com  Phone # (optional): 677-694-0152	CTE TOM J. Stanctupular  Committee Name  TUJ Zella  Name of Committee Treasurer  SEWELL St. REPTE, MA OLD COmmittee Mailing Address  E-mail:  Phone # (optional):
SUMMARY BALANCI	E INFORMATION:
Line 1: Ending Balance from previous report	250.55
Line 2: Total receipts this period (page 3, line 11)	192.00
Line 3: Subtotal (line 1 plus line 2)	442.55
Line 4: Total expenditures this period (page 5, line	\$ 3069.76
Line 5: Ending Balance (line 3 minus line 4)	-2627.21
Line 6: Total in-kind contributions this period (page	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	* 3000.0U
Line 8: Name of bank(s) used: 51. ) 86.5	Credit UNON./ RBG CHIZENS
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best of activity including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:	ontributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	s only)
Candidate with Committee  Legatify 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 tordance 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 finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the arthur of an behalf of this	in-kind contributions and liabilities for this reporting period and represents the

## SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4/26	Dear 10 M		
		gender stode odkreder, it gift mendt stommen sterne sterne sterne	
			7
	100 p		
		ra. da	
	. \		1
	4 2		
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ripts \$50 and under* (not listed above)	F192.00	
Line 11: TOTAL I	RECEIPTS IN THE PERIOD		Enter on page 1, line 2

<sup>\*</sup> 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 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.)

	To Whom Paid	mittee name and a page number o	T	T
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
7J0/17	Steples	Bridley Snys.	Pasier Bads	31.09
10/1/28	Home Lepot	1100 Reversal Pluy	Suppies	57.76
9/30/23	Best Buy	562 Santilli Ling EP1044	Supplier	(5,63
9/30/23	Restousing Begot	82 Borassti :	Suppries Falfest	131.08
9/14/23	BOS	5 hold frage	Food 2 Harrs St. 45 deply	88.46
7/14/23	SHISTELL	121 Browny Revere	Pravay	12,00
7/5/23	₹J\$	5 W2187	Fool Beachners	67.95
1/17/23	Culestos	28 Broadly	PZZC	8800
0/13	RESTY VAINCY	Browley Str 197	Ad	108
10110	ROVIN YOUL	Broading Reca	AU	182
0/05	Grale JAMI)	Browley	du	475
7/30	Stuller	Brodney Surger	Prino	F13.60
•		Line 12: Total Expenditures over	r \$50 (or listed above)	
		Line 13: Total Expenditures \$50 a		
	Enter on page 1, line $4 \rightarrow 1$	Line 14: TOTAL EXPENDITU	RES IN THE PERIOD	7 13 1 1

<sup>\*</sup> 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 (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
966	Rask John	Browley	AM	1411.00
7/20	Rese VVIII	Bralwy	Ad	108
9/18	Bulle	ON(14P	Ad	120.00
9118	Burn bushows Prontony	115 Boul St.	Pricon	79.09
9/13	Chan ber	Broudny	Filfeso	5/25
9/13	Dounc Reese	Browday	Al	\$270
9/3	ROYER JULAN	Brocaluy	AL	\$162.00
10/14/25	fe dex office	Braaling Says	ATro	9145.53
10/4/23	Beachans Luprama Cuyu	Police Status	xma tier	8750.00
10/11/23	BJS	surs.	Carly RMA	\$ 21231
		3		
	1	Line 12: Expenditures over \$50	(or listed above)	3069.76
Line 13: Expenditures \$50 and under* (not listed above)				
		ine 14: TOTAL EXPENDITU	URES IN THE PERIOD	

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

#### 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
10/30	Standropaks, Joh	15 Sevel St. Revere, MA	Personal 100A	\$3000.00
		100		
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				

Page 7