

# Form CPF M 102: Campaign Finance Report

**Municipal Form** 

Office of Campaign and Political Finance

BOARD OF ELECTION COMMISSIONERS,

File with: City of Town Clerk of Election Commission
Ending Date: 917 ARE MA
ay after election year-end report dissolution
Committee Name WAND 5  ARILYN CLARK  Name of Committee Treasurer  WANTED DWC REVIAC MADON  Committee Mailing Address  FOR ARILMAT 60 9 GMANL, COM  #(optional):
ORMATION:
9 4654.00 4654.00 4220.67 433.33 9 1829.00
wledge and belief, a true and complete statement of all campaign finance is and liabilities for this reporting period and represents the campaign with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date: 9/7/21  knowledge and belief, a true and complete statement of all campaign finance the the requirements of M.G.L. c. 55. I have not received any contributions, are not otherwise disclosed in this report.  knowledge and belief, a true and complete statement of all campaign arributions and liabilities for this reporting period and represents the in accordance with the requirements of M.G.L. c. 55.  (Candidate's signature)

#### 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)
6/7/21	RONALD CLARK 98 WOUTIN AVE REVINE MA 02151	500	THERMOWALL TEEN
6/17/21	JAMES ODONNEL 265 CREVENT ST REVERE MA 0215	100	TEACHER
6/24/21	DI NUE RAIMONDI 99 FOULER AUC REMERE MA 02151	100	Resolved TEACHER
6/24/31	Debra MARIONE 21 Fowler Arc RENDE MAR 02151	200	Exec Comm of mass
6/25/21	RONALD CLARK LOAN TO COMM	300	
7/1/21	RONALA CLAMA LOAN TO COMM	1000.00	
6/30/21	PATRICA DE ANGELES 11 BATEMAN AVE RENRE IMP 02151	500.00	M2L DENTAL  DENTAL HEALTH BDUCATOR
0/30121	LAUNA RÍGAS 7501 MILWAY DRIVL ALEXANDRÍA UA 22306	250.00	SYNEOS HEALTH COMMUNICATIONS
7/5/21	BAINNA CLARK 33 LYND 50 PERBODY MA 01960	25.00	
7/6/21	RONALD CLAPK LOAN TO COMMITTEE	249.00	
7/14/21	RONALD CLAST LOAN TO COMMITTEE	280.00	
7/28/21	SYLVIA LITMAN BAKEMAN A-C PENDE MA OZISI	50.00	
ine 9: Total Recei	pts over \$50 (or listed above)		
ine 10: Total Receipts \$50 and under* (not listed above)			
	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2 I include only those receipts not itemized above.

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)
7/29/21	PHILIP CONSOLD 169 RICE AVE DEVER MA OTISI	250.00	DROYER WORTH EAST
8/10/21	tENNETH Drew 6 maplewood terrece Brownies no or184	100	
8/23/21	ROWALD CLASK	234,00	
9/1/21	Roward CLARE	216.00	
9/3/21	RUNALD CLAM	300.00	
Line 9: Total Receip	ts over \$50 (or listed above)		
Line 10: Total Receip	ots \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD		Enter on page 1, line 2 include only those receipts not itemized above.

<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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
6/15/21	Clilicens BANK	Broadway Roche MA OLISI	Checks	27.75
6/23/21	BNLIFECTONAUTIE	I WY	website	614.00
6/22/21	CTE. Buttony (OBIANDS)	Revere ma	DONATION	6000
6/30/21	RAISE the money		Fee Service CHANGE	93.53
6(30/21	RADSE The money		Fee Service CHARGE	12.50
7/5/21	RAISE TAK MONY		Fee Service CHARGE	1.47
7/6/21	ONLINE CAMPAINE	NY	Social media	949.00
7/6/21	CONNOLLY Printag	17B GILL ST WODOND MA	Signs + Handovis	1100.27
7/14	ADVOCATE News	EUENETT MY	POLITOCAL AD	280.00
7/16/21	MONTEY THINGS	outher	Dumper stickers	78,00
MIZI	FACEBOON DD		Social media Boost	25.00
7/19/21	Dollar 4noc	LYNNWAY LYNN MA	Meet + Great Supplies	55.94
		Line 12: Total Expenditures over	er \$50 (or listed above)	
Line 13: Total Expenditures \$50 and under* (not listed above)				
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	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. Page 4

## SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
7/20/21	DUNTIN DOWNE	Lyonary Lyon MA	muest & General	57.75
7/20/21	Privily Preszel FNOTORY	4 Squire AD Reupe MA 02151	Mart & Greek	114.08
7/20/21	205 Broadway	Derre MA	most & Grant	33.95
7/27/11	Home Depot	RT 1 DANZES MA	Sign trocom	22.78
7/27/21	Home Depot	DAWURS MA	SIGN HOLDING	5.70
7/29/21	FACEBOOK		SOCIAL MEDIA AD BOOST	25.00
8/2/21	FACEBOOK		AD BOOST	25,00
8/6/21	FACEBOOK		SOCIAL MEUIA PD BOOST	14.18
8/16/51	Kelly ROBST BEET	Revene Benchl Derne MA	SIGN HOLD TO LOCUMEUS	13.64
8/18/21	CONOULY Primiting	17B GILL ST WODURU MA	SIGN HOLDERS FOR YARDS	67,73
8/18/21	FACEDOOL		SOLIAL MENIA PD BOOST	35.00
8/23/21	570p Y 540p	SWAMPSCOTT MA	Meighornoud PARTY DONATION	71,45
8/23/21	Price Rive	LYNNWAY LYNN MA	DONATOON Pray	19.34
		Line 12: Expenditures over \$50	(or listed above)	
Line 13: Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES 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.

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## SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
8/13/21	flome Depot	DAVERS MA	SUPPLIES	28.46
8 25 21	THE PENCHANT NOWS	Broadway Revise MA	POLICIOCAL AD	162.00
9/1/21	INDEPENDENT NEWS	Broadway Revoce MA	POLITICAL	216.00
9/1/21	KNAZY KMS Embrodry	Ctlelsia Mp	Ter SHIRTS	234.60
8/11/21	RAlse tue money		Fre Service CHANGE	5.15
8/1/21	RAISE The money		FER Servec CHArge	17.50
9/2/21	FACEBOOK		SOCIAL MedIA AD BOOST	38.11
9/1/21	Independent NEWS	Broadway Peure mas	POLICITION L PD	162.00
7/20/21	Tudependent News	Brondupy Reure ma	Pochzigal AA	279.00
		Line 12: Expenditures over \$	50 (or listed above)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Line 13: Expenditures \$50 an	d under* (not listed above)	Assessed to the second of the
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	4220.67

<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
	RONALD CLARK	95 W+10000 AVC REVIRC MA 02151	5+900 + +1904	300,00
7/1/21	Rowald CLAAK		510ms Hammanes	100000
7/6/21	ROWAD CLAME		POLICAL AD	249.00
7/14/21	RONALD CLAAN		POLICIOCAL AD	250.00
		147 Mag 1		
	MICE STATE OF THE			
				7
		1 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (		
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				1829.00