

Form CPF M 102: Campaign Finance Report Municipal Form RAARB OF

Municipal Form

BOARD OF

Office of Campaign and Political FinanceELECTION

COMMISSIONERS

OI Massachuseus	15 File with City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 1.1.201	5 Ending Date: VERESMAY JOIS
Type of Report: (Check one) 8th day preceding preliminary	y after election year-end report dissolution
Candidate Full Name (if applicable) Councillor AT LARGE Office Sought and District 350 Revere Beach Blud 9-10L Residential Address	MM TO Elect Rober & HAAS & Committee Name FURINTA HAAS Name of Committee Treasurer SAME Committee Mailing Address The Number (optional): 781-284-5639
SUMMARY BALANCE INFO	DRMATION:
Line 1: Ending Balance from previous report	24660.94
Line 2: Total receipts this period (page 3, line 11)	2525.00
Line 3: Subtotal (line 1 plus line 2)	27185.86
Line 4: Total expenditures this period (page 5, line 14)	3 183.44
Line 5: Ending Balance (line 3 minus line 4)	24002.52
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	8
Line 8: Name of bank(s) used: T.D. BANK 411 Br	TOAdwar Tierete
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my know activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions finance activity of all persons acting under the authority or on behalf of this committee in accordance visioned under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)	and liabilities for this reporting period and represents the campaign
Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my katherity of all persons acting under the authority or on behalf of this committee in accordance with incurred any liabilities nor made any expenditures on my behalf during this reporting period.	th the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee OR Candidate with independent activity filing separate repo I certify that I have examined this report including attached schedules and it is, to the best of my k finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind con campaign finance activity of all persons acting under the authority or on behalf of this committee	knowledge and belief, a true and complete statement of all campaign attributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature) Date: 8/24/15

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.)

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
	X		
	Xx		
	//V		
	1/8		
	1:04		
	1/4		
		(
ine 9: Total Rece	ipts over \$50 (or listed above)	25.00	
ine 10: Total Rece	sipts \$50 and under* (not listed above)	25.00	
ine 11: TOTAL I	RECEIPTS IN THE PERIOD	2525.00	← 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 OVER \$50 FOR PERIOD

DATE RECEIVED	NAME	RESIDENTIAL ADDRESS	AMOUNT	OCCUPATION/EMPLOYER
1/28/2015	George Anzuoni	141 Fenley St., Revere, MA 02151	\$100.00	
2/17/2015	Sheila A. Arsenault	75 Garfield St., Chelsea, MA 02150	\$125.00	
8/6/2015	James H. Batmasian	215 N. Federal Highway	\$250.00	Real Estate Developer
	Investments LTD	Boca Raton, FLA 33432		
4/24/2015	Steven G. Clayman	100 Everett Ave., Chelsea MA 02150	\$200.00	
1/16/2015	Kevin J. Chiles	P.O. Box, Revere MA 02151	\$100.00	
1/16/2015	Vincent R. Conte	9 Stone Terr., Marblehead, MA 01945	\$100.00	
1/16/2015	Howard A. Cook	1 Summit Dr., Swampscott, MA 01907	\$75.00	
8/6/2015	Paul W. Dimaura	2285 River St., North Weymouth, MA 02191\$200.00	1\$200.00	
8/6/2015	Joseph R. Dinanno	507 Essex St., Lynnfield, MA 01940	\$500.00	Real Estate Developer
3/12/2015	Joseph Gulla	7 Amd Road, Peabody MA 01960	\$100.00	
6/29/2015	Julie A. Marcotte	227 Court Road, Winthrop MA 02152	\$150.00	
2/23/2015	Michael J. Merullo	370 Chestnut St., Lynnfield, MA 01940	\$250.00	Owner, Capitol Waste
1/16/2015	Joseph C. Prizio III	3 Rose Farm Lane, Woburn, MA 01801	\$200.00	
6/10/2015	William Settipane	39 Cummings Ave., Revere, MA 02151	\$150.00	

\$2,500.00 \$25.00 \$2,525.00

TOTAL DISBURSEMENTS OVER \$50: TOTAL DISBURSEMENTS UNDER \$50: TOTAL DISBURSEMENTS:

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	nittee name and a page number on		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
		13		
		0		P
		1/2		
		NY .		
	//	y		
	Y			
	J			
	19			
	1/3			
	\N			
	11/1			
	1 1/2			
	V			
				Sustant
				Bres.
		Line 12: Total Expenditures over	er \$50 (or listed above)	2647.44 536 3183.49
		Line 13: Total Expenditures \$50	and under* (not listed above)	136.
		I to a 14. TOTAL EVDENDATE	UDEC IN THE PEDIOD	0.00110
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDITU	UKES IN THE PERIOD	3/83.7

^{*} 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 OVER \$50 FOR PERIOD

DATE	то whom paid	ADDRESS	PURPOSE	AMOUNT
5/28/15 1/28/15 5/8/15 8/13/15 7/2/15	Advocate Newspaper Advocate Newspaper Beachmont Veterans PTO City of Revere Scholarship Fund EPW	P.O. Box 490407, Everett, MA 02149 P.O. Box 490407, Everett, MA 02149 15 Everard St., Revere, MA 02151 281 Broadway, Revere, MA 02151 10 Wood Burns Ave., Saugus, MA 01906	Advertisement Advertisement Donation/T-shirts Sponsor	\$100.00 \$70.00 \$100.00 \$60.00 \$199.00
5/5/15	Garfield Elementary P10	1/5 Garfield Ave., Revere, MA 02151	I -snirts	\$100.00
8/3/15	ING LLC	P.O. Box 380, Revere, MA 02151	Advertisement	\$80.00
4/19/15	Lincoln School PTA	68 Tuckerman St., Revere, MA 02151	T-shirts	\$100.00
4/25/15	Madison Group Inc.	300 Broadway, Revere, MA 02151	Printing	\$178.44
4/3/15	Paul Revere School	395 Revere St., Revere, MA 02151	T-shirts	
6/22/15	Revere Beach Partnership	381 Broadway, Revere, MA 02151	Advertisement	\$150.00
5/28/15	Revere Beach Beautification Com.	P.O. Box 166, Revere, MA 02151	Barrels	\$200.00
3/9/15	Revere Chamber of Commerce	108 Beach St., Revere, MA 02151	Donation	\$110.00
5/7/15	Revere Chamber of Commerce	108 Beach St., Revere, MA 02151	Donation	\$150.00
3/4/15	Revere Columbus Day Parade	251 Broadway, Revere, MA 02151	Donation	\$125.00
6/23/15	RHS Cheerleader Parents	365 Vane St., Revere, MA 02151	Sponsor	\$100.00
3/5/15	Rumney Marsh Academy	140 Amer. Legion Highway, Revere, MA	T-shirts	\$125.00
3/5/15	RYBS	33 Loomis St., Revere, MA 02151	Donation/Sponsor.	\$350.00
5/7/15	Silvio Cella Family Foundation	P.O. Box 1074, Lynnfield, MA 01940	Sponsor	\$100.00
3/4/15	Susan B. Anthony Middle School	107 Newhall St., Revere, MA 02151	Advertisement	\$100.00

\$2,647.44 \$536.00 \$3,183.44

TOTAL EXPENDITURES OVER \$50: TOTAL EXPENDITURES \$50 AND UNDER: TOTAL EXPENDITURES IN THE PERIOD:

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)	6
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND Co	ONTRIBUTIONS	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.

Page 6

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 these liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
				B