

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

oi Massachu	setts	File with: City or Town Clerk or Election Commission
Fill in Re	eporting Period dates: Beginning Date: 5/25	
Type of	Report: (Check one)	
1. **		30 day after election year-end report dissolution
Peter Piet	Candidate Full Name (if applicable)	The Committee To Elect Peter Pietrantonio
Councilor	· Ward Six	Committee Name Marlene Pietrantonio
	Office Sought and District	Name of Committee Treasurer
11 Winth	rop Street	11 Winthrop Street
 -	Residential Address	Committee Mailing Adamss
E-mail:	peterpet4everett.com	E-mail:
Phone # (opt	ional):	Phone # (optional):
		J ω ¬¬==
	SUMMARY BALANC	CE INFORMATION:
	Line 1. Ending Dalamas from mariana	<u>∑</u>
	Line 1: Ending Balance from previous report	
	Line 2: Total receipts this period (page 3, line 11)	50000
	Line 3: Subtotal (line 1 plus line 2)	5010.06
	Line 4: Total expenditures this period (page 5, lin	ne 14) 6645.04
	Line 5: Ending Balance (line 3 minus line 4)	—minus 1634.98
10	Line 6: Total in-kind contributions this period (pa	age 6) .00
	Line 7: Total (all) outstanding liabilities (page 7)	3300.00
	Line 8: Name of bank(s) used: Everett Bank	
A ffidavit of i	Committee Treasurer:	
I certify that I	I have examined this report including attached schedules and it is, to the best	t of my knowledge and belief, a true and complete statement of all campaign finance
[activity, inclu	uding all contributions, loans, receipts, expenditures, disbursements, in-kind c ity of all persons acting under the authority, or on behalf of this committed in	contributions and liabilities for this reporting period and represents the campaign
ı	r the penalties of perjury:	Date: 10/29/23
	Wall and the same of the same	(Ocasurer's signature)
FURCAN	NDIDATE FILINGS ONLY: Affidavit of Candidate: (check I bo	ox only)
I certify activity,	ate with Committee that I have examined this report including attached schedules and it is, to the of all persons acting under the authority or on behalf of this committee in act any liabilities nor made any expenditures on my behalf during this reporting	e best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, a period that are not otherwise disclosed in this report.
l certify finance a	ate without Committee that I have examined this report including attached schedules and it is, to the activity, including contributions, loans, receipts, expenditures, disbursements in finance activity of all persons acting under the authority of on belian of the	best of my knowledge and belief, a true and complete statement of all campaigns, in-kind contributions and liabilities for this reporting period and represents the candidate in accordance with the requirements of M.G.L. c. 55.
Signad profes	IM Tulul	Date: 10/29/23

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	A c	Occupation & Employer	
	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
3/28	Barresi, Eileen and Sal 23 Heritage St Saugus, MA	150.00	Dry Cleaners	
10/18	Bono, Michael 193 Belmont St Everett, MA	150.00	Owner	
10/19	Bussell, Steve and Maria 8 Freeman Ave Everett, MA	100.00	Clerk	
3/29	Capone, Fred 383 Broadway Everett, MSA	125.00	Attorney	
10/19	Cataldo, Joseph 36A Broadway Everett, MA	100.00	Attorney	
10/19	Ciano, Andrea and Maria 40 Ramshead Rd Medford, MA	100.00	Construction	
19/19	Cornelio, Antonio and Margaret 10 Luke Road Everett, MA	100.00	Retired	
10/18	Gadman, Arthur 940 Broadway Everett, MA	100.00	Pipefitter Union	
5/21	Hickey, James 43 High St Everett, MA	200.00	Electrician	
10/19	Hughes, Roland 54 Lindenwood St Stoneham, MA	100.00	Attorney	
5/16/	Kelly, Eileen 10 W Foster St Everett., MA	96.05	Nurse	
10/18	Lewey, Michael 92 Old Landry Way Charleston,MA	80.00	Retired	
ine 9: Total Rece	ipts over \$50 (or listed above)	1401.05		
Line 10: Total Receipts \$50 and under* (not listed above)		659.01		
ine 11: TOTAL l	RECEIPTS IN THE PERIOD	2060.06	← Enter on page 1, line 2	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address	A	Occupation & Employer	
	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
6/15 6/15	Mattuchio, Henry Mattuchio, Henry and Margaret 55 Tappan St, Everett, MA	200.00 100.00	Retired	
7/7 10/19	Mattuchio, John and Leslely 15 Birchill St Melrose, MA	500.00 500.00	Dry Cleaners	
7/17	Navis, Joe and Susan 50 Oxford Rd Tewksbury, MA	300.00	Retired	
10/18	Noonan, Kevin 40n Robin Rd Wakefield, MA	100.00	Operations Manager	
7/13	Ragucci, David 49 Montrose Ave Everett, MA	250.00	Sales	
6/21	Richards, Michelle 18 Montrose St Everett, MA	200.00	Retired	
6/21	Ryan, Tom 11 Dean St Everett, MA	200.00	Sales	
10/19	Sacramone, Marianne 5 Ballester St Wakefield, MA	100.00	Retired	
10/19	Scott, Lisa and James 15 Summer St Everett, MA	100.00	Retired	
10/18	Tarr, Chris 27 Jackson Lane Wakefield, MA	100.00	Sales	
10/19	Tarr, Wayne 27 Jackson Lane Wakefield, MA	100.00	Sales	
10/19	Zaniboni, Brian 25 Pleasant St Middleton, MA	100.00	Retired	
10/26	White, Lenny 12 Bertha Ave Raymond, NH	100.00	Truck Driver	
Line 9: Total Rece	ipts over \$50 (or listed above)	2950.00		
Line 10: Total Rece	eipts \$50 and under* (not listed above)			
Line 11: TOTAL 1	RECEIPTS IN THE PERIOD	2950.00	← 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 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.)

Data Data	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
7/17	Continuprinting	P.O. Box 2464 Woburn,MA 01888	signage	636.14
8/10	Continuprinting	P.O. Box 2464 Woburn, MA 01888	signage	1083.01
9/13	Continuprinting	P.O. Box 2464 Woburn, MA 01888	signage	756.39
10/13	Continuprinting	P.O. Box 2464 Woburn, MA 01888	signage	1603.82
10/18	Everett Independent	385 Broadway Revere, MA 02151	Advertisement	180.00
10/21	Everett Independent	385 Broadway Revere, MA 02151	Advertisement	255.00
10/25	Everett Independent	385 Broadway Revere, MA 02151	Advertisement	360.00
10/26	Everett Independent	385 Broadway Revere, MA 02151	Advertisement	400.00
7/24	Discover		Computer	616.68
10/24	Square Deli	421 Broadway Everett,MA	Food	450.00
9/18	Square Deli	421 Broadway Everett, MA	Food	304.00
		Line 12: Total Expenditur	es over \$50 (or listed above)	6645.04
		Line 13: Total Expenditure	es \$50 and under* (not listed above)	
	Enter on page 1, line 4 -	Line 14: TOTAL EXPEN	IDITURES IN THE PERIOD	6645.04

^{*} 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
	2 103 AM S			
	No. 1 Days			
			COSA MADERIAL SALES	
				210
		Line 12: Expenditures over \$5	0 (or listed above)	
		Line 13: Expenditures \$50 and under* (not listed above)		
		Line 13: Expenditures \$50 and	under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	

^{*} 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 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
6/15	Peter Pietrantonio	11 Winthrop St Everett, MA	Campaign expenses	2000.00
10/23	Peter Pietrantonio	11 Winthrop ST Everett, MA	Campaign expenses	1300.00
				3300.00
		Line 15: In-Kind Contributio	ns over \$50 (or listed above) ns \$50 & under (not listed above)	3300.00
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND	CONTRIBUTIONS	3300.00

^{*} 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.

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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
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	