

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	///2025 Ending Date: 10/18/2025
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Katy Leigh Rogers	Committee to Elect Katy Rogers
Candidate Full Namo (if applicable)	Committee Name
Council at Large Office Sought and District	Patricia J. Rogers Name of Committee Treasurer
	78 Englewood AVE, EVERETH, MA.
Residential Address	Committee Mailing Address 02.149
Telephone Number (optional): (017-780-2105	Telephone Number (optional): 617-780-6638
SUMMARY BALANC	'E INFORMATION:
S un	
SUMMARY BALANC Line 1: Ending Balance from previous report Line 2: Cotal receipts this period (page 3, line 11)	\$ 667.12
Line 2: Cotal receipts this period (page 3, line 11)	\$9,387.58
Eine 3: Sibtotal (line 1 plus line 2)	\$10,054.70
Line 4: Fetal expenditures this period (page 5, line	e 14) \$ 6,379.50
Line 5: Ending Balance (line 3 minus line 4)	\$ 3,675.20
Line 6: Total in-kind contributions this period (pa	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	\$2,600.00
Line 8: Name of bank(s) used: EVECEH B	ank
Affidavit of Committee Treasurer:	
I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of the contributions of the con	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 a Signed under the penalties of perjury:	accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 11033003
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	(Treasurer's signature)
Candidate with Committee and no activity independent of the committee	
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 cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period.
Candidate without Committee OR Candidate with independent activity filing set 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 authority or on behalf of this	best of my knowledge and belief, a true and complete statement of all campaign in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	Mus (Candidate's signature) Date: 10-23-20

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) Amoun		Occupation & Employer (for contributions of \$200 or more)		
1/3/2025	Joseph Asaturo LA Pierce Aug. Exerct, MA. 02149	#100.00			
2/13/2025	JOSEPH PISOTEURD 69 PRESCE AUG. EVERETT, MA. D2149	#100.00			
1/16/2025	Brenda Suppa Toakes St. Everett, MA. O2149	\$250.00			
2/18/2025	JOHN MCCOFMOCK 24 Merriman St. Unit 2 BOSTON, MA. 02130	#300.00	N/A		
2/19/2025	Desorah Larry Keegen 96 Burtlett Rd Winthrop, MA. O2152	#100.00			
2/19/2025	Christopher GROVER 5525 MARINA DR. DENTON, TX. 76208	\$100.00			
2/28/2025	Diego Maidonado 17 Hamiet Pi. Maiden, MA.02148	\$ 100.00			
3/14/2025	Geraldine Carlin 15 Acorn Way BREUSTER, MA.	\$250.00	Retired		
6/11/2025	Patricia J. Rogers 78 Englewood Ave. Everett, M.A. 02149	1,000.00	Retired		
6/11/2025	Stephanie Mc Colaugh 46 Calhoun Ave Apr. 3 Everett, MA. 02149	\$60.00			
6/18/2025	Jean McAdam 30 Francis St. Everett, MA. 02149	\$100.00			
6/19/2025	Donald Parris 202 E. BROADWAYAVE. Fairfield, IA. 52556	# 100.00			
Line 9: Total Recei	pts over \$50 (or listed above)	\$2540.00			
Line 10: Total Rece	ipts \$50 and under* (not listed above)	-			
Line 11: TOTAL RECEIPTS IN THE PERIOD ← 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.					

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report all receipts. Please include your committee name and a page number on each page.)

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Name and Residential Address Date Received (alphabetical listing required)		Amount	(for contributions of \$200 or more)		
Date Received	MATO TYCO				
6/27/2025	88 Vernal St. Everett, MA. 02 149	#100.00			
6/29/2025	Rehecca Edmondson 27 GreenHALGE AVE. EVERETT, MA. 02149	\$250.00	Attorney		
9/8/2025	Raje Sh Keshar 14 Athens Dr. 01906 Saugus, MA. 01906	#500.00	STORE OWNER		
1/20/2005	Witton Gomes Rangel Strates Blen Rangel Surgus, M. 9. 01906	\$500.00	Restaurant OWNER		
6/2025	Salvy J. Sacro Sacro Plazo Exerett, MA. 02149	\$400.00	PROPERTY Managemen		
6/19/2025	Mary Fracobacci 71 Englewood Ave. Everett, MA. 02149		Retired		
6/17/2025	Valerie Berard Fuchii Exerett, MA. 02149	4200,04	Retired		
6/18/2025	Pry Panzini Apt. 609 1760 Revere Beach Drug Everett, MA. O2149	\$200.00	Car bealership Owner		
6/18/2025	Kevin McGonagle 56 inhurman Aug Medrose, MA. 02176	* 125.00			
6/18/2025	SEADOOT AVE.	# 100.00	- AND		
6/18/2025	John Hanlon 173 main St. Everett, mr. 02149	#100.00			
Line 9: Total Rec	eipts over \$50 (or listed above)	*2775.00			
Line 10: Total Rec	ceipts \$50 and under* (not listed above)				
Line 11: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2 Ild include only those receipts not itemized above.		

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(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.)

port all receipts. P	lease include your committee name and a pa	GC Hallader on the	Occupation & Employer
Date Received	Name and Residential Address (alphabetical listing required) Amount		(for contributions of \$200 or more)
6/18/2025	William Hart 12 AlbiON St. Everett, MA.02149		
6/18/2025	Lauren Culpsting Valueriy St. 124 Waveriy St. 02149	\$100.00	
8/15/2025	TBEW Local Union 2222 PAC 80530 159 Thomas Burgin PKW4 FL	# ₂ 50.00	
4/19/2025	Cancenters Local Union 3:		
	PAR COF# 80996 10 Holworthy St. Cambridge MA. 02.138	#500.00	
6/18/2025	Sheet Metal Workers Union People's Comm. CPF8019/Local 19 1157 Adams St. Ste. 2 Darchester, M.A. 02124	* 500.00	
ulaukoas	Tronworkers Local #7 ma pac- Ocpic#80219 193012 Colony Ro. 30 Boston, MA. 02127	\$300 co	
9/8/2025	Pointers + Allied Trade DC+1 Pointer Comm, CPF 80144 15 Colorte Pd MA 02131	700,00	
9/17/2025	Processes Local Union \$16 P.A.C. CPF ID \$80652 750 Dorchester Ave \$3033 Dorchester MA. 03135-1135	\$1500.00	
Line 9: Total Rec	eipts over \$50 (or listed above)	\$2750.00	
Line 10: Total Rec	ceipts \$50 and under* (not listed above)	\$1302.58	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	\$9387.58	Enter on page 1, line 2 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	
4/6/2025		e O Santilli Hgwy Everett, MA .0214	Banner Donation	\$250.00	
5/20/2025		P.O. BOX 490135 Everett, MA. 0214	EVENT	*65,00	
5/27/2025	David Fadul	1390 KENYUUST. NU UNIT 813 2001 Washington D.C.	Campaign Consultant	\$200,00	
6/2/2025	CUCKOO Signs	72 Chelsea St. Everett, MA. 02149	Clean up Evereth T-Shirt Donation	# 425,00	
	Poll Progressive Strategies	1390 Kenyanst. NW Unit 813 Washington D.C. 2001	Political Consultant	\$320.00	
9/20/2005	Everett Teachers Association	Everett, MA.	Flocking Donation EHS Cherreaders	\$50,00	
10/17/2003	Connolly Printing Signs	17B Gill St. Waburn, MA 01801	Signs	*257.13	
10/21/2003	Thrift CO Printing		Politicah Literature Mailing	\$3393,42	
4/20)203	Square Space 8 Clarkson St. New York, NY	on-Line internet address	Website	\$218.00	
6/18/2025	Thliften Printing	56 PWaski ST. Peabody, MA . 01961		\$ _{770.95}	
4/18/2025	8/10 Bon+ Grill	8 NOTWOOD AVE. EVERET, MA. 02149	Fundraiser	* 430.00	
•		Line 12: Total Expenditures over	er \$50 (or listed above)	\$6379.50	
		Line 13: Total Expenditures \$50	and under* (not listed above)		
* If you have itemi	Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES 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.

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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)	Ø
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			D

^{*} 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
6/1/2022	Kany L. Rogers	78 EnglewoodAue Everett, MA.02149	. to fund my campaign	\$100.00
4/13/2023	Katy L. Rogers	n 4 11	11	#1,000.ca
10/16/2023	Katy L. Rogers Katy L. Rogers	16 16 14	11	\$1,500.0
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				\$2,600.00