



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2025 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

**Maria Radosta Bussell**

Candidate Full Name (if applicable)

**Everett City Council**

Office Sought and District

**8 Freeman Ave**

Residential Address

E-mail: **MariaForEverett@gmail.com**

Phone #: **617 224-2812**

**Maria Bussell Everett City Council**

Committee Name

**Joetta Yutkins**

Name of Committee Treasurer

**84 Garland St, Everett, MA 02149**

Committee Mailing Address

E-mail: **jyutkins@yahoo.com**

Phone #: **781 526-3734**

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

**3340.00**

Line 2: Total receipts this period (page 3, line 12)

**2750.00**

Line 3: Subtotal (line 1 plus line 2)

**6090.00**

Line 4: Total expenditures this period (page 5, line 15)

**5108.20**

Line 5: Ending Balance (line 3 minus line 4)

**981.80**

Line 6: Total in-kind contributions this period (page 6, line 18)

Line 7: Total (all) outstanding liabilities (page 7, line 19)

Line 8: Total out-of-pocket expenses this period (page 8, line 22)

Line 9: Name of bank(s) used:

**Everett Co-Operative**

### Affidavit of Committee Treasurer:

I 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 activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind 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 accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

*Joetta Yutkins*

(Treasurer's signature)

Date: 10/27/25

### FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

#### Candidate with Committee

☐ I 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 activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

#### Candidate without Committee

☐ I 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 activity, including contributions, loans, receipts, expenditures, disbursements, in-kind 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Candidate's signature)

Date: \_\_\_\_\_



## SCHEDULE A: RECEIPTS

i.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 or less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule D Liabilities. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional-page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
7/1/25	Lawrence & Michelle Cardinale 49 Baker Rd Everett, MA	250.00	Deputy Fire chief City of Everett
7/2/25	Sandra Juliano 28 Lindor Rd North Reading, MA	100.00	Retired
7/2/25	Steven Iannaco 9 Tufts Ave Everett, MA	50.00	Retired
7/2/25	Michelle Capone 383 Broadway Everett, MA	50.00	Property Manager
7/2/25	Julie A Baratta 25 Woodville St Everett, MA	100.00	Teacher
7/2/2025	Thomas & Camille Abruzzese 18 Pierce Ave Everett, MA	50.00	Retired
7/29/2025	Peter Pietrantonio 11 Forest Ave Everett, MA	100.00	Retired
7/29/2025	Tanis McKinnon 2 Colonial Dr Litchfield, MA	100.00	Administration Devens Air Force Base
7/29/2025	Carmela Saritisi 7 Stone St Saugus, MA	100.00	Haridresser
7/29/2025	Vincent Simonelli 20 Bolester St Everett, MA	100.00	Finance BU
7/29/2025	Norine Piazza 5 Washington St Everett, MA	50.00	Retired
7/29/2025	Charles Radosta 8 Chestnut Place Everett, MA	1000.00	Retired
7/29/2025	Tony Raymond, Dartmouth St	100.00	MBTA Bus driver



# SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/15/2025	Teamsters Local 25 544 Main St Boston, MA	500.00	Local 25
9/15/2025	Salvy Sacro Sacro Plaza Everett, MA	250.00	Business owner
9/15/2025	Sean Diamond 45 Thurman PK Everett, MA	100.00	Retired
Line 10: Total Receipts over \$50 (or listed above)		2750.00	<i>* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.</i>
Line 11: Total Receipts \$50 and under (not listed above)		0	
Line 12: TOTAL RECEIPTS IN THE PERIOD		2750.00	

← Enter on page 1, line 2



## SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule E. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
7/2/25	Stewarts Pub	140 Jefferson Ave Everett, MA	Fundraiser ✓1004	500.00
7/25/25	Julianna Yutkins	84 Garland St Everett, MA	Fundraiser Expense✓1005	63.44
8/18/25	Connolly Printing	17B Gill St Woburn, MA	Palm Cards ✓ 1009	796.88
8/21/25	Northrup Printing	919 Winthrop Ave Revere, MA	Lawn Signs ✓1007	318.75
8/21/25	Steve Moniak Design	175 Richdale Ave Cambridge, MA	Palm Cards✓1008	350.00
9/10/25	Krazy Kats	55 Kimball Rd Chelsea, MA	Tee shirts✓1006	659.00
10/9/25	Krazy Kats	55 Kimball Rd Chelsea, MA	Tee shirts✓1012	145.00
10/14/25	Kiwanis Club of Everett	573 Broadway#A Everett, MA	Pasta dinner✓1011	120.00
10/14/25	Connolly Printing	17B Gill St Woburn, MA	Palm card mailing✓1010	1041.37
10/18/25	USPS	11 Norwood St Everett, MA	Mailing stamps✓101	1080.00



**SCHEDULE B: EXPENDITURES (continued)**

Date Paid *	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
<p>* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.</p> <p>Enter on page 1, line 4 →</p>			Line 13: Expenditures over \$50 (or listed above)	5074.44
			Line 14: Expenditures \$50 and under (not listed above)	33.76
			Line 15: TOTAL EXPENDITURES IN THE PERIOD	5108.20



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## SCHEDULE D: LIABILITIES

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and the outstanding balance, 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 19: TOTAL OUTSTANDING LIABILITIES (ALL)	



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Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. *Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.*

[illegible]

← Enter on page 1, line 8