

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

	otto					T21 14 61			
Fill in Re	eporting Period dates:	Beginning Date:	06/26	6/2025	Ending I	File with: City Date: 10	or Town Cler 1/27/2025	rk or Electi	on Commiss
Type of F	Report: (Check one)								
☐ 8th day	preceding preliminary	8th day preceding elect	tion	□ 30 day	y after election	year-e	nd report	dis	solution
Tina Mari				Oliver	f Committee				
City Cour	Candidate Full Name (in notified At Large Everett			Committee Name Nicolas E Snook					
25 Summ	Office Sought and ait Avenue, Everett, Ma 02			Name of Committee Treasurer 25 Summit Avenue, Everett, Ma 02149					
E-mail: tmo	Residential Add	ress				mmittee Mailin			
Phone #: 61	7-429-1393			J -	617-548-8105				
!		SUMMARY BAL	ANCE	INFO	RMATION:		20	L1J	
	Line 1: Ending Balance	from previous report			0		2025 0] [
	Line 2: Total receipts th	nis period (page 3, line 12	!)		2610.00		-9-	155	
	Line 3: Subtotal (line 1	plus line 2)			2610.00				
	Line 4: Total expenditur	res this period (page 5, lin	ne 15)		1912.53		= 3	SSIKK	
	Line 5: Ending Balance	(line 3 minus line 4)			697.47		21]	
	Line 6: Total in-kind con	atributions this period (pe	age 6, lir	ne 18)	145.00]	
	Line 7: Total (all) outsta	nding liabilities (page 7,	line 19))	800.000				
	Line 8: Total out-of-pock	et expenses this period (J	page 8, 1	line 22)	7.97			7	
	Line 9: Name of bank(s)	used: Member's F	Plus C	redit U	nion				
certify that I hactivity, including inance activity	mmittee Treasurer: ave examined this report including a ng all contributions, loans, receipts, of all persons acting under the autho he penalties of perjury:	expenditures, disbursements, in	n-kind con	itributions a	and liabilities for this r	reporting period f M.G.L. c. 55.	tatement of all and represent	ts the camp	paign
OR CAND	IDATE FILINGS ONLY:	Affidavit of Candidate: (chec	k 1 box o	nly)					
I certify that activity, of	with Committee at I have examined this report includ- all persons acting under the authorit y liabilities nor made any expenditure	ly or on behalf of this committee	e in accon	dance with	the requirements of M	4GL c 55 11	have not receiv	of all camp ved any co	saign finance ntributions,
I certify tha finance acti	without Committee at I have examined this report includi- vity, including contributions, loans,	receipts, expenditures, disburse	ements, in	-kind contri	ibutions and liabilities	s for this renorting	no period and	nennesents	aign
campaign fi	mance activity of all persons acting t	under the authority or on behalf	f of this ca	ındidate in i	accordance with the re	quirements of l	M.G.L. c. 55.		
igned under th	ne penalties of perjury:	amarieblive	ri		(Candidate's s	ignature)	Date: 10	1201202	

SCHEDULE A: RECEIPTS

M.G.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 or \$50 and 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.

Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)
10/4/2025	Miscellaneous Donor	50.00	N/A
10/11/2025	Miscellaneous Donor	50.00	N/A
10/3/2025	Carpenter's Local 328 11 Hotworthy Street Cambridge, Ma 02138	500.00	Local Union
7/15/2025	David A Oliveri 25 Summit Ave Everett, Ma 02149	250.00	Custodian
7/4/2025	Kristen Offveri 19 Maple Street Helmette, NJ 08828	100.00	Director, Corporate Audit & Assurance Services at Organon
10/13/2025	Lawrence Vozzalia 17 Holyoke Street Malden, Ma 02148	200.00	Nina Snow & Ice Control Owner
7/22/2025	Maria, Bussell 8 Freeman Ave Everett, Ma 02149	50.00	Union Rep
10/11/2025	Marie Buseell 8 Freeman Ave Everett, Ma 02149	200.00	Union Rep
7/27/2025	Militiar Chaves 17 Presuprintyer Aug Eventil, Ma 02146	25.00	College Student
7/29/2025	Michael Gomez 100 Saint Anselm Orive Manchester, NH 03101	10.00	College Student
7/30/2025	Rosemany & Edward Lyons 74 Letand Road Norfolk, Ma 02056	250.00	Retired
10/11/2025	Stacey Cotto 9 Mead Street Everett, Ma 02149	50.00	N/A
10/17/2025	Dorothy Covino, 91 Central Street	50.00	NA

SCHEDULE A: RECEIPTS (continued)

Name and Residential Addresses Calculate Received (alphabetical listing require			Occupation & Employer		
7/25/2025	(alphabetical listing required) Tina Marie Oliveri 25 Summit Ave	Amount	(for contributions of \$200 or more) Norfolk County Sheriff's Office Recovery Coach		
9/22/2025	Everett, Ma 02149 Tina Marie Oliveri 25 Summit Ave Everett, Ma 02149	300.00	Norfolk County Sheriff's Office Recovery Coach		
7/18/2025	Tony Raymond 48 Dartmouth St #2 Everett, Ma 02149	25.00	MBTA Bus Driver		
	pts over \$50 (or listed above)	2560.00	* If you have itemized receipts of \$50 and under, include them in line 10. Line 11		
Line 11: Total Receipts \$50 and under (not listed above)		10500 66	should include only those receipts not itemized above.		
Line 12: TOTAL RI	ECEIPTS IN THE PERIOD	2560.00	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
8/3/2025	ActBlue	Online	Service fees for donation platform	17.99
10/3/2025	Advocate Newspaper	573 Broadway Everett, Ma 02149	2x3 ad for event	90.00
8/10/2025	Amazon	Online	Gift bags, hand sanitizer, stress balls, tissues	117.36
8/24/2025	BJs Wholesale Club	278 Middlesex Ave Medford, Ma 02155	Candy for gift bags	65.96
10/7/2025	BJs Wholesale Club	278 Middlesex Ave Medford, Ma 02155	Snacks for event	54.97
10/14/2025	Camelot Events	23 North Ave Wakefield, Ma 01880	Chairs and tables rental for event on 10/11/25	162.13
9/25/2025	CVS Photo	1080 Eastern Ave Malden, Ma 02148	18x24 enlargements for signs	35.66
9/13/2025	Dollar Tree	50 Broadway Malden, Ma 02148	Cable ties, tablecloths, loot bags, serving bowl	20.72
9/25/2025	Home Depot	2 Mystic View Road Everett, Ma 02149	Wood for sign assembly	19.20
8/13/2025	Queensboro Industries	Online	T-shirts/polo shirts for campaign	138.85
8/29/2025	Staples	390 West Street Mansfield, Ma 02048	Signs, flyers, palm cards, postcards	759.69
8/11/2025	Stickefy	Online	2x2 stickers	35.00
10/6/2025	USPS	11 Norwood Street Everett, Ma 02149	Stamps	234.00

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/10/2025	USPS	11 Norwood Street Everett, Ma 02149	Stamps	61.00
200				
	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			
* If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above. Enter on page 1, line 4 →		Line 13: Expenditures over \$50	1812.53	
		Line 14: Expenditures \$50 and		
		Line 15: TOTAL EXPENDIT	1812.53	

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

M.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. I 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 and 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 contribution received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all receipts. Please

uue the canataate	or committee name and a-page number	on each additional page.	onal pages as needed to report an rec	
Date Received		Residential Address	Description of Contribution	Value
9/27/2025	Lynda Norton	9 Dale Street Woburn, Ma 01888	24 Cookies	72.00
10/4/2025	Nick Snook	25 Summit Ave Everett, Ma 02149	Water, napkins, plates	38.00
10/10/202 5	Kaleigh Snook	25 Summit Ave Everett, Ma 02149	Food	54.00
10/10/2025	Cristina Snook	25 Summit Ave Everett, Ma 02149	Food, balloons	53.00
* If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.		Line 16: In-Kind Contributions over	145.0	
		Line 17: In-Kind Contributions \$50		
	Enter on page 1, line 6 →	Line 18: TOTAL IN-KIND CONTR	IBUTIONS IN THE PERIOD	145.00

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
7/25/2025	Tina Marie Oliveri	25 Summit Ave Everett, Ma 02149	Campaign Loan	500.00
9/22/2025	Tina Marie Oliveri	25 Summit Ave Everett, Ma 02149	Campaign Loan	300.00
	Enter on page 1, line 7 →	Line 19: TOTAL OUTSTAN	DING LIABILITIES (ALL)	800.00

SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

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.

Date Paid	Name and Address of Vendor (alphabetical listing required)	Amount	Purpose of Expenditure
6/26/2025	Dollar Tree	7.97	Clipboards, folders
Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50 or listed above)			* If you have out-of-pocket expenses of \$50
	ized Out-Of-Pocket Expenditures \$50 and		and under, include them in line 20. Line 21 should include only those expenditures not itemized above.
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD 7.97			← Enter on page 1, line 8