

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:	28 19 Ending Date: 12 5 19
Type of Report: (Check one)	(Also WILL COME YEAR END AS NO CHANGES)
☐ 8th day preceding preliminary ☐ 8th day preceding election 〔	■ 30 day after election year-end report dissolution
Candidate Full Name (if applicable) BOND OF SELECTIVED Office Sought and District OHTCHING HIL Rd - SAVGUS, MA Residential Address E-mail: JVCPATS FAN @ HOTMAIL, COM Phone # (optional): (781) 233-1978	Committee to Elect Joffey Cicolno Committee Name JVIE A. Cicolnol Name of Committee Treasurer 6 Hoteline Hill Rd - Saugis Committee Mailing Address E-mail: JVIES 1010970 Aormail, Com Phone # (optional): (781) 233-1978
SUMMARY BALANCI	E INFORMATION:
Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 7) Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used:	ge 6)
	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) The second of the second

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 (alphabetical listing required)	Occupation & Employer (for contributions of \$200 or more)	
10/31/19	BOND - DOSEPH 109 SAIRMSTREET BOSTON MA	Amount 500 -	RESTATE OWNER REAL
10/31/19	CATINO PAT 31 ATTOWNEAD DRIVE SMYLY	300-	Gym owner
10/3//19	DEFRONZO ROBERT 10 OAKRIEGE DE SAUSUS	500-	BODY Shop OWNER (EVERET)
10/31/19	FAMALER GEORGE 20 IRTITAGE LANGUS	100	
10/31/19	CASNE ROY 25 Greyslave Rd SAUSUS	200-	Contractor
10/31/19	Philbin Andy 17 Jmiper Drive SASU	500-	PRPEARY MANagener Howeshort
10/31/19	Philbin MATT 39 CASTLE RE NAHOUT	600-	Property Managner+ Anvestments
11/2/19	Ricciardelli, Michael 5 SAUSUS AVE, SAUSUS	100	
11/3/19	Ricciardelli David 21 Columbus Augus SAUgus	75	
VAMOUS	JEFFREY V. Ciáolinii CANDIDATE PADVANCES	897.12	Shareholder/CPA - AAFCPAS
			DEC 1
Line 9: Total Receipts over \$50 (or listed above) 3,672,12		Wis A A	
Line 10: Total Receipts \$50 and under* (not listed above)			A 8: 31 A 8: 31 Jeus, MASS.
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.

SCHEDULE A: RECEIPTS (continued)

Name and Residential Address Date Received (alphabetical listing required) Amount			Occupation & Employer (for contributions of \$200 or more)	
Date Received	(aiphabetteat fishing requirett)	Amount	(101 COMMINUMENTS OF \$200 OF MOTE)	
	,			
6				
			REO TOWN OF	
			INE SAUGUS SAUGUS	
			8:31 MASS.	
Line 9: Total Reco	eipts over \$50 (or listed above)			
	reipts \$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.

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.)

report all expenditures. Please include your committee name and a page number on each page.)					
	To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
10/23/19	(Pd by Causidate)	How. I dow ST SAUSUS	COFFEE DONVIS MUSSIANS Sian holders	\$47.45	
10/24/19	DUNGIN DONVIS (Pd by CANDIDATE)	Hamilhow ST SAUGUS	10 100 001	\$39.85	
10/30/19	Dunky N Don'ts (pd by cowordate)	Hamilton ST SAUSUS	11 121(1	841.14	
11/5/19	PriNCE PIZZA (Pd by Chuditale)	Rt / South	Election Night Party (Split cost W/ SElectman Paretta)	#175-	
11/5/19	OF MANTINO (pd by Condidate)		DJ- Election Night OPTINCE	# 175-	
11/5/19	(Pd by Condidate)	RT I NORTH (Home Depot PLAZA)	PRINTING	#216.54	
			Zale Town	2	
			CLERK NOF SAUG		
			A 8: 3	B	
	Line 12: Total Expenditures over \$50 (or listed above)		694.98		
Line 13: Total Expenditures \$50 and under* (not listed above)			202.14		
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				es not itemized	

^{*} 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)

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	~			
			Y .	
			17 单 7	
			TOWN TOWN	
				hfi
			SAUS SAUS	
			BUS A	
			8: 3) OFFICE MASS.	
	/		3) SS.	E.
] 			1
				<u> </u>
				1
		Line 12: Expenditures over \$5	0 (or listed above)	
		I in a 12. Error 114. 050 1		
		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				

^{*} 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
				i i
			MOT WARDT WARDT	
			CLERK'S	EIVE
			A 8: 31	Ö
	/			
		Line 15: In-Kind Contribution	as over \$50 (or listed above)	
		Line 16: In-Kind Contribution	s \$50 & under (not listed above)
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND	CONTRIBUTIONS	

^{*} 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
VANIOUS 2015-2018	CANOLOR JEFFREY Cicouni	6 th Tching HILRE	LOANS to CAMPAIGN	1,435.70
11/2019	MI MII (SANA)	0 t 4 t t1	COSTS PAID FOR 2019 CAMPAIGN COSTS	#897.12
			TOWN O	DEC.
			13 A SAUGUE	EIVE
			8: 3 L MASS.	
	Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL) #2332 82			