



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2015 OCT 26 PM 2:39

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2015 Ending Date: 10/16/2015

Type of Report: (Check one)

☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Jessica Finocchiaro	Committee to Elect Jessica Finocchiaro
Candidate Full Name (if applicable)	Committee Name
Greater Lawrence Technical School Committee, City of Methuen	Joan Finocchiaro
Office Sought and District	Name of Committee Treasurer
22 Elsmere Avenue Methuen, MA 01844	P.O. Box 882 Methuen, MA 01844
Residential Address	Committee Mailing Address
Telephone Number (optional): 9785661786	Telephone Number (optional): 9785661786

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$0.00
Line 2: Total receipts this period (page 3, line 11)	\$2541.07
Line 3: Subtotal (line 1 plus line 2)	\$2541.07
Line 4: Total expenditures this period (page 5, line 14)	\$1124.31
Line 5: Ending Balance (line 3 minus line 4)	\$1416.76
Line 6: Total in-kind contributions this period (page 6)	\$0.00
Line 7: Total (all) outstanding liabilities (page 7)	\$20,000.00
Line 8: Name of bank(s) used:	The Savings Bank Methuen

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:

Joan Finocchiaro

(Treasurer's signature)

Date:

10/26/15

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

Candidate with Committee and no activity independent of the 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.

Candidate without Committee OR Candidate with independent activity filing separate report

☐ 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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Jessica Finocchiaro

(Candidate's signature)

Date:

10/26/2015

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)	Amount	Occupation & Employer (for contributions of \$200 or more)
7/15/2015	James Atkinson 7 Cochrane Street Methuen, MA 01844	\$50	
1/30/2015	Stephen Beliveau 102 Farrwood Drive Haverhill, MA 01835	\$28	
1/29/2015	Joseph Bella 77 Ford Street Unit E Methuen, MA 01844	\$25	
8/13/2015	Louise Bevilacqua 84 Winona Avenue Haverhill, MA 01830	\$50.00	
1/29/2015	Luz A. Carrion 35 1/2 Arnold Street Methuen, MA 01844	\$30	
1/1/2015	Committee to Elect Jessica Finocchiaro P.O. Box 882 Methuen, MA 01844	\$347.07	*Transfer from state account
1/1/2015	Greta Condee 24 Ashford Street Methuen, MA 01844	\$50.00	
3/2/2015	Talmage Cooley 66 Water Street Apt 3D Brooklyn, NY 11201	\$500	CEO, Democracy.com
1/4/2015	Dennis J Deeb II 50 Conrad Street Methuen, MA 01844	\$25.00	
1/22/2015	Thomas Duggan 75 Main Street North Andover, MA 01845	\$75.00	
7/2/2015	Lisa Yarid Ferry 5 Tanglewood Circle Methuen, MA 01844	\$50	
1/29/2015	Joan Finocchiaro 116 Museum Square #116 Lawrence, MA 01840	\$50	
Line 9: Total Receipts over \$50 (or listed above)		\$1,280.07	
Line 10: Total Receipts \$50 and under* (not listed above)		\$0.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$2541.07	← 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)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
1/29/2015	Salvatore Finocchiaro 24 Compromise Lane Sandown, NH 03873	\$25	
1/26/2015	Susan Goeke 31 Golden Street Haverhill, MA 01830	\$25	
1/29/2015	Barbara Grondine 4 Moody Avenue Methuen, MA 01844	\$25	
1/29/2015	Michelle Jimenez 3 Lafayette Street 1st Floor Haverhill, MA 01832	\$20	
1/29/2015	Lynne Kumm 180 Old Ferry Road Methuen, MA 01844	\$28	
10/14/2015	LIUNA - LOCAL 175 55 Union Street Methuen, MA 01844	\$250.00	
1/29/2015	Gary Mannion 380 Elm Street #22 Lawrence, MA 01841	\$25	
1/17/2015	Mimi O'Shea 494 Hartford Street Westwood, MA 02090	\$50.00	
1/14/2015	David Perelman 144 B Robbins Street Waltham, MA 02453	\$28.00	
2/4/2015	Jordan Berg Powers 18 Townsend Street #1 Worcester, MA 01609	\$100	
1/29/2015	Cindy Rapa 45 Washington Street #20 Methuen, MA 01844	\$30	
2/19/2015	Robert Scrima P.O. Box 91642 Lakeland, FL 33804	\$500	Retired, Not Employed
1/28/2015	John Zebrowski 7 Callahan Street Methuen, MA 01844	\$5	
Line 9: Total Receipts over \$50 (or listed above)		\$1,111.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$0.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$2541.07	← 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

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)	Amount	Occupation & Employer (for contributions of \$200 or more)
7/21/2015	John Zebrowski 7 Callahan Street Methuen, MA 01844	\$50	
1/17/2015	Linda Zebrowski 7 Callahan Street Methuen, MA 01844	\$100.00	
Line 9: Total Receipts over \$50 (or listed above)		\$150.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$0.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$2541.07	← 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
1/29/2015	Bada Bing	26 Hampshire Street Methuen, MA 01844	Food for event	\$74.78
7/15/2015	City of Methuen	Methuen City Hall 41 Pleasant Street Methuen, MA 01844	Voter information materials	\$5.00
8/12/2015	Committee to Elect Sean Fountain	534 Prospect Street Methuen, MA 01844	Campaign donation at kickoff event	\$20.00
1/14/2015	Democracy Ventures, Inc.	One Boston Place, 37th Floor Boston, MA 02108	Merchant Fees	\$1.09
1/30/2015	Democracy Ventures, Inc.	One Boston Place, 37th Floor Boston, MA 02108	Merchant Fees	\$1.09
1/26/2015	Democracy Ventures, Inc.	One Boston Place, 37th Floor Boston, MA 02108	Merchant Fees	\$0.98
2/4/2015	Democracy Ventures, Inc.	One Boston Place 37th floor Boston, MA 02108	Merchant Fees	\$3.90
2/19/2015	Democracy Ventures, Inc.	One Boston Place 37th floor Boston, MA 02108	Merchant Fees	\$24.05
3/2/2015	Democracy Ventures, Inc.	One Boston Place 37th floor Boston, MA 02108	Merchant Fees	\$24.05
7/2/2015	Democracy Ventures, Inc.	One Boston Place 37th floor Boston, MA 02108	Merchant Fees	\$2.60
7/15/2015	Democracy Ventures, Inc.	One Boston Place 37th floor Boston, MA 02108	Merchant Fees	\$2.60
7/27/2015	Democracy Ventures, Inc.	One Boston Place 37th floor Boston, MA 02108	Merchant Fees	\$2.30
Line 12: Total Expenditures over \$50 (or listed above)				\$162.44
Line 13: Total Expenditures \$50 and under* (not listed above)				\$0.00
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$1124.31

* 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
1/29/2015	DollarTree	178 Haverhill Street Methuen, MA 01844	Paper supplies, decorations, etc. for event	\$23.38
6/8/2015	Emerge Massachusetts	P.O. Box 170874 Boston, MA 02117	Women of the Year Reception donation	\$50.00
1/31/2015	Facebook, Inc.	One Broadway Cambridge, MA 02142	Advertising	\$3.67
8/5/2015	Heav'nly Donuts	137 Pelham Street Methuen, MA 01844	Volunteer coffees	\$10.00
3/28/2015	Hostgator.com	5005 Mitchelldale Suite 100 Houston, TX 77092	Website	\$15.00
6/16/2015	Hostgator.com	5005 Mitchelldale Suite 100 Houston, TX 77092	Website	\$53.70
6/15/2015	Hostgator.com	5005 Mitchelldale Suite 100 Houston, TX 77092	Website	\$15.00
3/13/2015	Howe Street Superette	163 Howe Street Methuen, MA 01844	Drinks and paper supplies for fire fighters	\$13.15
7/21/2015	Jessica Finocchiaro	22 Elsmere Avenue Methuen, MA 01844	Repayment Campaign Loan Gr. Lawrence Tech School Write In Campaign. Incurred: 11/5/2013	\$536.96
1/29/2015	Market Basket	186 Haverhill Street Methuen, MA 01844	Cake for event	\$16.49
6/22/2015	Methuen Festival of Trees	13 Branch Street Methuen, MA 01844	Annual meeting event donation	\$30.00
1/29/2015	PayPal, Inc.	1 International Place Boston, MA 02110	Merchant Fees	\$0.81
1/28/2015	PayPal, Inc.	1 International Place Boston, MA 02110	Merchant Fees	\$0.14
Line 12: Expenditures over \$50 (or listed above)				\$768.30
Line 13: Expenditures \$50 and under* (not listed above)				\$0.00
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$1124.31

* 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 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
7/15/2015	Staples, Inc.	73 Turnpike Street North Andover, MA 01845	Office supplies	\$6.00
7/15/2015	Staples, Inc.	73 Turnpike Street North Andover, MA 01845	Office supplies	\$18.77
3/13/2015	Tripoli Bakery, LLC	163 Howe Street Methuen, MA 01844	Pizza for Friends of Methuen Fire Fighters Event	\$40.00
1/31/2015	United States Post Office	272 Broadway Methuen, MA 01844	Postage	\$55.80
5/19/2015	United States Post Office	272 Broadway Methuen, MA 01844	P.O. Box Renewal Fee	\$64.00
7/20/2015	United States Post Office	272 Broadway Methuen, MA 01844	PO Box key	\$9.00
Line 12: Total Expenditures over \$50 (or listed above)				\$193.57
Line 13: Total Expenditures \$50 and under* (not listed above)				\$0.00
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$1124.31

Enter on page 1, line 4 →

* 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
			Line 15: In-Kind Contributions over \$50 (or listed above)	\$0.00
			Line 16: In-Kind Contributions \$50 & under (not listed above)	\$0.00
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	\$0.00

* 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.

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
4/16/2014	Jessica Finocchiaro	22 Elsmere Avenue Methuen, MA 01844	Repayment for campaign costs (liability transferred from state account)	\$5,000.00
7/31/2014	Jessica Finocchiaro	22 Elsmere Avenue Methuen, MA 01844	Repayment for campaign costs (liability transferred from state account)	\$10,000.00
9/16/2014	Jessica Finocchiaro	22 Elsmere Avenue Methuen, MA 01844	Repayment for campaign costs (liability transferred from state account)	\$5,000.00
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				\$20,000.00