



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance REGISTRAR OF VOTERS

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2014 JAN 21 P 3 24

CITY OF MEDFORD

Fill in dates:

Reporting Period Beginning Month 10 Date 29 Year 2013 Ending Month 12 Date 31 Year 2013

Type of report: (Check one)

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

Full Name of Candidate (if applicable)

Ann Marie Cugno

Office Sought and District

Medford School Committee

Residential Address

871 Fellsway, Medford, MA 02155

Tel. No. (optional)

Committee Name

Committee to Elect Ann Marie Cugno

Name of Committee Treasurer

Gina Leccese

Committee Mailing Address

871 Fellsway, Medford, MA 02155

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>1,253.62</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>105.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>1,358.62</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>200.00</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>1,158.62</u>

Line 6: Total in-kind contributions this period (page 4)	\$ <u>—</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>250.00</u>
Line 8: Name of bank(s) used	<u>Citizens trans to East Boston Savings Bank</u>

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:

Gina Leccese
Treasurer's signature (in ink)

1/17/14
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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:

Ann Marie Cugno
Candidate signature (in ink)

1/17/14
Date

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.

This page may be copied 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)
Line 9: Total receipts in excess of \$50 (or listed above)				
Line 10: Total receipts \$50 and under* (not listed above)		105	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		105	00	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 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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	0

* 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
Aug 2005	Ann Marie Cugno	871 Fellsway Medford, MA	Start Campaign	\$250.00
Enter on page 1, line 7				Line 18: OUTSTANDING LIABILITIES (ALL) 250.00



Form CPF M 102: Campaign Finance Report Municipal Form

REGISTRAR OF VOTERS

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

2014 JAN 21 P 3: 24

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: CITY OF MEDFORD Beginning Date: 1-1-2013 Ending Date: 10-28-2013

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Ann Marie Cugno
Candidate Full Name (if applicable)

Medford School Committee
Office Sought and District

871 Fellsway, Medford MA 02155
Residential Address

Telephone Number (optional): (781) 396-1783

Committee to Elect Ann Marie Cugno
Committee Name

Gina Leccese
Name of Committee Treasurer

871 Fellsway, Medford MA 02155
Committee Mailing Address

Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>94.28</u>
Line 2: Total receipts this period (page 3, line 11)	<u>3,319.99</u>
Line 3: Subtotal (line 1 plus line 2)	<u>3,414.27</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>2,160.65</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>1,253.62</u>
Line 6: Total in-kind contributions this period (page 6)	<u>_____</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>450.00</u>
Line 8: Name of bank(s) used:	<u>Citizens Transferred to East Boston</u>

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: Gina Leccese (Treasurer's signature) Date: 10/27/2013

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: Ann Marie Cugno (Candidate's signature) Date: 10/27/2013

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)
10-11-2013	Riccardo Buzzanga 9 North Shore Rd, Dorsey NH 03038	100. ⁰⁰	
10-7-2013	Sebastiana Cugno 6 Colonial Dei Billecca Ma 01821	100. ⁰⁰	
10-11-2013	John Freeman 44 Daly Rd, Mendon Ma 0155	100. ⁰⁰	
9-18-2013	Alco Guarino 53 Upland Rd, Burlington MA 01803	100. ⁰⁰	
10-18-2013	Friends of Michael J. McGlynn 1 Mammola Way, Needham Ma 01955	100. ⁰⁰	
10-11-2013	Robert Gaine 15 West St. Mendon Ma 01555	100. ⁰⁰	
10-12-2013	Tammy Quar 867 Fellowship Mendon Ma 01555	175. ⁰⁰	
10-11-2013	Guerciero Ricci 30 Majow Arc. Mendon Ma 01555	75. ⁰⁰	
10-12-2013	Tina Rossetti unit 8 14 Englewood Ave, W. Amherst 01865	100. ⁰⁰	
9-6-2013	Joseph Sacco 235 Wintthrop St. unit 5501 Mendon Ma 01555	100. ⁰⁰	

Line 9: Total Receipts over \$50 (or listed above) 950.⁰⁰

Line 10: Total Receipts \$50 and under* (not listed above) 2369.⁹⁹

Line 11: **TOTAL RECEIPTS IN THE PERIOD** 3,319.⁹⁹

← 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
10-21-2013	AGP	94 Vine St. Everett, MA 02149	Balloon Tank Chamber / Halloween members Square	69.06
10-21-2013	Boccelli's Restaurant	374 Main St. Medford, MA 02155	Fundraiser Food	100.00
10-25-2013	Boccelli's Restaurant	374 Main St. Medford MA 02155	Service Citizens Club Lunch	90.00
10-14-2013	Ann Marie Cugno	871 Fellsway Medford MA 02155	Campaign, Fundraiser Supplies & Food	1,049.83
10-25-2013	Ann Marie Cugno	871 Fellsway Medford MA 02155	Halloween Candy Chamber Medford Sq.	50.95
10-14-2013	Michael Cugno	871 Fellsway Medford MA 02155	Campaign / Fundraiser Paper, ink, post cards	208.82
10-8-2013	Italo's Bakery	509 Main St. Medford, MA 02155	Fundraiser	53.00
10-12-2013	Medford Elks Club	19 Washington St. Medford MA 02155	Hall Expense	117.00
10-14-2013	Medford Elks Club	19 Washington St Medford, MA 02155	Bill on Hall for fundraiser	255.00
10-14-2013	Anthony Leccese	863 Fellsway Medford MA 02155	Fundraiser Food	93.04
Line 12: Total Expenditures over \$50 (or listed above)				2086.70
Line 13: Total Expenditures \$50 and under* (not listed above)				93.95
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				2180.65

* 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 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
8/2005	Ann Marie Cugno	871 Fellowship Modern mo 02155	Start of Campaign for supplies	450.00
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	450.00