Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

REGISTRAR OF VOTERS
2015 OCT 26 P 3:57
CITY OF MEDFORD

File with: Medford
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning Month: AUG. Date: 25 Year: 2015 Ending Month: OCT. Date: 26 Year: 2015

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

Robert Emmett Skerry Jr.
Full Name of Candidate (if applicable)
Medford School Committee
Office Sought and District
72 Terrace Rd. Medford
Residential Address
781-983-5576
Tel. No. (optional)

Friends of Robert E. Skerry Jr
Committee Name
Dawn S. Giovino
Name of Committee Treasurer
129 Cedar Rd.
Committee Mailing Address
781-396-7787
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	$ 3752.94
Line 2: Total receipts this period (page 2, line 11)	$ 4480.00
Line 3: Subtotal (line 1 plus line 2)	$ 8232.94
Line 4: Total expenditures this period (page 3, line 14)	$ 4601.24
Line 5: Ending balance (line 3 minus line 4)	$ 3631.70
Line 6: Total in-kind contributions this period (page 4)	$ 0
Line 7: Total (all) outstanding liabilities (page 4)	$ 0
Line 8: Name of bank(s) used Brookline Bank	

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:

Dawn S. Giovino
Treasurer's signature (in ink)

10/26/15
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:

Robert Emmett Skerry Jr
Candidate signature (in ink)

10/26/2015
Date

DATE	LAST NAME	FIRST NAME	ADDRESS	CITY	ST	ZIP	AMT
October 14, 2015	MacDonald	Alan	92 Bacon Street	Winchester	MA	01890	$250
October 14, 2015	Teamsters Local 25 Drive		544 Main Street	Boston	MA	02129	$250
October 14, 2015	Mullen & Giarrusso, PC		21 Franklin Street	Quincy	MA	02169	$200
October 14, 2015	Brady	William and Julie	17 Saltonstall Road	Medford	MA	02155	$100
October 14, 2015	Carr	William	235 Winthrop Street #7712	Medford	MA	02155	$100
October 14, 2015	Curtin	Law Offices of Christopher		Medford	MA	02155	$100
October 14, 2015	Davis	Bernadette	287 Governors Avenue	Medford	MA	02155	$100
October 14, 2015	DeFronzo	Ronald	421 High Street	Medford	MA	02155	$100
October 14, 2015	Friends of Michael J. McGlynn		1 Mammola Way	Medford	MA	02155	$100
October 14, 2015	Law Offices David P. Skerry		40 Daniels Street	Medford	MA	02155	$100
October 14, 2015	Lepore	Lorenzo	101 Main Street Suite 206	Medford	MA	02155	$100
October 14, 2015	Licausi	Angelo	11 St. James Road	Medford	MA	02155	$100
October 14, 2015	Mabbett	Arthur and Beverly	37 Powder House Road Ext.	Medford	MA	02155	$100
October 14, 2015	Morrissey	Edward and Theresa	142 Park Avenue	Medford	MA	02155	$100
October 14, 2015	Twomey	Kathleen and Thomas	14 Dutton Circle	Medford	MA	02155	$100
October 14, 2015	Ververis, Esq.	Michael	P.O. Box 165	Medford	MA	02155	$75
October 14, 2015	Caruso	Joan	40 Eliot Road	Arlington	MA	02474	$60
October 14, 2015	Chisholm	Edward	7 Woburn Street	Medford	MA	02155	$60
October 14, 2015	Lepore	Marty	38 Hall Avenue	Medford	MA	02155	$60
October 14, 2015	Petrella	Peter and Barbara	27 Stearns Avenue	Medford	MA	02155	$60
October 14, 2015	Ryan	Richard and Debra	58 Doonan Street	Medford	MA	02155	$60
October 14, 2015	Wolfson	Richard	366 Salem Street	Medford	MA	02155	$60
							$2,335
Friends of Robert E. Skerry, Jr.							
Page 1							

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)
10-14-15	Alan MacDonald. 92 BACON ST. Winchester	250	00	Administrator @ LAWRENCE MEMORIAL Hospital
10-14-15	Teamsters Local 25 547 MAIN ST. Charlestown	250	00	Local 25 Political ACTION Committee
10-14-15	ATTY. thomas mullen 21 FRANKLIN ST. QUINCY, MA	250	00	Atty. at Law
Line 9: Total receipts in excess of $50 (or listed above)		2335.	00	
Line 10: Total receipts $50 and under* (not listed above)		2145.	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		4480.	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 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.

This page may be copied 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	
10-6-15	Boston Sullivan Co	269 Spring ST MEDFORD, MA 02155	Pens - Skerry for SC	238.	00
10-22-15	Kernwood Forbes Press	104 MAIN ST. MALDEN	Campaign Cards and Mailing	2500.	00
9-27-15	Medford Celebration Committee	City Hall MEDFORD, MA	Parade Donation	100.	00
9-15-15	US Postmaster	~~Boston~~ MA	Postage for Campaign Kickoff Event	127.	40
10-1-15	US Postmaster	Boston, MA	Postage for Campaign mailing PostCards	757.	00
10-1-15	Rasso's Restaurant	Mystic Ave, Medford	Food for Campaign Function	837.	00
			Line 12: Expenditures over $50	4559.	40
			Line 13: Expenditures $50 and under*	41.	84
Enter on page 1, line 4			**Line 14: TOTAL EXPENDITURES**	4601.	24

*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.

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

* 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
Enter on page 1, line 7		**Line 18: OUTSTANDING LIABILITIES (ALL)**		

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.