



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
CITY CLERK'S OFFICE
METHUEN, MA

2024 JAN 22 AM 9:26
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10-21-23 Ending Date: 12-31-23

Type of Report: (Check one)

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

Jana Zanni Pesce

Candidate Full Name (if applicable)

Councilor at Large

Office Sought and District

16 Pine Tree Dr. Methuen, MA

Residential Address

E-mail: attyzanni@gmail.com

Phone #: 978-852-7255

Committee to Elect Jana Zanni Pesce

Committee Name

Vincenzo Pesce

Name of Committee Treasurer

16 Pine Tree Dr. Methuen, MA 01844

Committee Mailing Address

E-mail: attorneypesce@gmail.com

Phone #: 617- 922- 0865

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

3689.62

Line 2: Total receipts this period (page 3, line 12)

8036.53

Line 3: Subtotal (line 1 plus line 2)

11726.15

Line 4: Total expenditures this period (page 5, line 15)

5239.39

Line 5: Ending Balance (line 3 minus line 4)

6486.76

Line 6: Total in-kind contributions this period (page 6, line 18)

0

Line 7: Total (all) outstanding liabilities (page 7, line 19)

5677.84

Line 8: Total out-of-pocket expenses this period (page 8, line 22)

77.84

Line 9: Name of bank(s) used:

Salem Co-op

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: _____

(Treasurer's signature)

Date: 1-22-24

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

Candidate with 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 that are not otherwise disclosed in this report.

Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____

(Candidate's signature)

Date: 1-22-24

SCHEDULE A: RECEIPTS

1.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 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 contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule E 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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/25/23	Ajao, Remi 278 Oakland Ave. Methuen, MA 01844	100.00	
10/24/23	Alexander Colarusso 20B Gates Lane Wakefield, MA 01880	250.00	Realtor- Colarusso Realty
10/24/23	Aznoian, Peter 182 East Street Methuen, MA 01844	250.00	Self- Employed
10/22/23	Banwait, Manjit 12 Pine Tree Drive Methuen, MA 01844	350.00	Chief Financial Officer- Conlin's Pharmacy
10/24/23	Beauregard, David 10 Fenwick Circle Methuen, MA 01844	100.00	
10/25/23	Bergeron, Kenneth 17 South Bowdoin Street Lawrence, MA 01843	500.00	Retired
10/18/24	Buckley, Christopher 33 Jills Way Tewksbury, MA 01876	100.00	
10/24/23	Buonanno, Vincent 4 Stoneybrook Lane Methuen, MA 01844	200.00	Retired
11/6/23	Castillo, Erika 945 Riverside Drive, Unit 23 Methuen, MA 01844	100.00	
10/24/23	Cronin, John 16 Rivers Edge Place Methuen, MA 01844	200.00	President- St. Anns Home
10/24/23	Devlin, Stacy 38 Blueberry Lane Methuen, MA 01844	100.00	
10/23/23	Didio, Rick 55 Pine Tree Drive Methuen, MA 01844	100.00	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/19/23	DiFiore, Raymond 18 Rebecca way Methuen, MA 01844	100.00	
10/24/23	Fairburn, Fredrick 18 Riverview Ave. Methuen, MA 01844	250.00	Attorney- Fairburn Law Office
10/24/23	Faro, Anthony 66 Golf Ave. Methuen, MA 01844	100.00	
10/31/2023	Faucher, Ross 87 Lowell Street Methuen, MA 01844	250.00	Retired
10/24/23	Fiorante, John 70 Green Street Newbury, MA 01951	200.00	Engineer-Northrop Grumman for C41 Systems
10/30/23	Guiffrieda, Salvatore 8 Cranberry Lane Pelham, NH 03078	100.00	
10/24/23	Hashem, Saba 318 Broadway Street Methuen, MA 01844	250.00	Attorney- Hashem Law
10/24/23	Hashem, Ashley 6 Beechwood Drive Methuen, MA 01844	200.00	Director- Medicare/Medicaid Services
10/24/23	Iannucciello, Paul 213 Carlton Lane North Andover, MA 01845	150.00	
10/24/23	Kazanjian, George 55 Sevoian Drive Methuen, MA 01844	250.00	Retired
10/26/2023	Lacroix, Richard 11 Oak Ridge Road Methuen, MA 01844	100.00	
10/24/23	Lapore, Carmen 142 River Street Middleton, MA 01949	200.00	Attorney- Self
10/24/23	Lussier, Thomas 5 East Street Methuen, MA 01844	250.00	Administrator- Lussier Group
Line 10: Total Receipts over \$50 (or listed above)		7450	<p>* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.</p> <p>← Enter on page 1, line 2</p>
Line 11: Total Receipts \$50 and under (not listed above)		586.53	
Line 12: TOTAL RECEIPTS IN THE PERIOD		8036.53	

10/24/2023	Maroun, Christopher- 33 Regency Place- North Andover, MA 01845	\$	250.00	Retail- Butcher Boy Market
10/24/2023	Max, Peter - 595 North End Blvd., Salisbury, MA 01952	\$	200.00	Engineer- BAE Systems
10/24/2023	McNamara, Scott- 4 Oakhill Drive, Methuen, MA	\$	200.00	Police Chief- City of Methuen
10/24/2023	Merheb, Elie - 5 Eastman Dr, Derry NH 03038	\$	100.00	
10/24/2023	Perry, Neil- 121 Hampstead Street, Methuen, MA 01844	\$	100.00	
11/2/2023	Pesce, Jennifer- 120 Mill Road, Middleton, MA 01949	\$	250.00	Unemployed
10/23/2023	Rondinelli, Frank- 197 Carterfield Road, North Andover, 01845	\$	250.00	Chiropractor- MFC
10/24/2023	Tello, James- 7 Overbrook Road, Middleton, MA 01949	\$	500.00	Broker- Mass Insurance Agency
10/24/2023	Vargas, Albidalia- 6 Eagle Lane, Methuen, MA 01844	\$	100.00	
10/24/2023	Zanni, Jeffrey- 4 Hawkes Brook Lane, Methuen, MA 01844	\$	500.00	President- Integrum
10/24/2023	Zepaj, Mario- 78 Mill Street, Middleton, MA 01949	\$	250.00	Developer- Zepaj Development LLC

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 D. 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
11/1/2023	Connolly Printing	178 Gill Street Woburn, MA 01801	Mailers/Marketing	2375.12
10/27/23	Connolly Printing	178 Gill Street Woburn, MA 01801	Signs	317.16
10/23/23	CTE Neil Perry	P.O, BOX 305 Methuen, MA 01844 United States	Fundraiser	100.00
12/31/23	Donorbox	1520 Belle View Blvd. # 4106	Fees Associated with Online Donations	125.44
11/13/23	Illustrious Promotions	226 Mt. Vernon Street Lawrence, MA 01843	Marketing	425.00
1/13/23	Methuen Life	P.O. Box 485. Windham, NH 03087	AD	565.00
11/6/23	The Eagle Tribune	100 Turnpike Street North Andover, MA 01845	AD	450.00
10/24/23	The Irish Cottage	17 Branch Street Methuen, MA 01844	Fundraiser	800.00

SCHEDULE B: EXPENDITURES (continued)[illegible]

** 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 (or listed above)

5157.72

Line 14: Expenditures \$50 and under (not listed above)

81.67

Line 15: TOTAL EXPENDITURES IN THE PERIOD

5239.39

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

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. 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 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 contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. 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 of Contributor	Address	Description of Contribution	Value

[illegible]

** 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.*

Enter on page 1, line 6 →

Line 16: In-Kind Contributions over \$50 (or listed above)

Line 17: In-Kind Contributions \$50 and under (not listed above)

Line 18: TOTAL IN-KIND CONTRIBUTIONS IN THE PERIOD

SCHEDULE D: LIABILITIES

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.

[illegible]

Enter on page 1, line 7 →

Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)

5677.84

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.~~

[illegible]

Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50 (or listed above)

Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and under (not listed above)

Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD

** If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.*

← Enter on page 1, line 8



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Form CPF M 102: Campaign Finance Report Municipal Form

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RECEIVED
CITY CLERK'S OFFICE
METHUEN, MA

2023 OCT 30 AM 11:

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01-01-2023 Ending Date: 10-20-2023

Type of Report: (Check one)

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

Jana Zanni Pesce

Candidate Full Name (if applicable)

School Committee(current)/ City Council(sought)

Office Sought and District

16 Pine Tree Drive, Methuen

Residential Address

E-mail: attyzanni@gmail.com

Phone # (optional):

Committee to elect Jana Zanni Pesce

Committee Name

Vincenzo Pesce

Name of Committee Treasurer

16 Pine Tree Drive, Methuen

Committee Mailing Address

E-mail: attorneypesce@gmail.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

410.15

Line 2: Total receipts this period (page 3, line 11)

6001.01

Line 3: Subtotal (line 1 plus line 2)

6411.16

Line 4: Total expenditures this period (page 5, line 14)

2721.54

Line 5: Ending Balance (line 3 minus line 4)

3689.62

Line 6: Total in-kind contributions this period (page 6)

910.00

Line 7: Total (all) outstanding liabilities (page 7)

5600.00

Line 8: Name of bank(s) used: Salem Co-Op

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: [Signature]

(Treasurer's signature)

Date: 10-30-23

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

Candidate with 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 that are not otherwise disclosed in this report.

Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature]

(Candidate's signature)

Date: 10-30-23

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)
10-17-2023	Robert D. Armano 265 Broadway Methuen, MA 01844	100.00	
10-20-2023	David Consoli 215 N. Lowell Street Methuen, MA 01844	100.00	
10-20-2023	Anthony Copani 5 Spickett Valley Drive Atkinson, NH 03811	300.00	Attorney Self- Employed
10-11-2023	David DiNatale 5 Pine Tree Drive Methuen, MA 01844	51.01	
10-18-2023	Joseph Giuffrida 11 Judith East Lane Methuen, MA 01844	100.00	
10-17-2023	Scott Martin 177 Pleasant Street Norwell, MA 02061	500.00	Attorney Self Employed
10-14-2023	Rocco Pesce 24 Winthrop Street Everett, MA 02149	500.00	Auditor's Dept. City of Everett
10-20-2023	Suzanne Piscitello 21 Cypress Street Lawrence, MA 01844	250.00	Retail Canobie Gifts/Self
10-14-2023	Anthony Rossi 325 Heath Street Brookline, MA 02467	1000.00	Attorney Rossi and Associates
09-27-2023	Jana Zanni Pesce 16 Pine Tree Drive Methuen, MA 01844	3000.00	Attorney Self
Line 9: Total Receipts over \$50 (or listed above)		5901.01	
Line 10: Total Receipts \$50 and under* (not listed above)		100.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		6001.01	← 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)[illegible]

Line 11: TOTAL RECEIPTS IN THE PERIOD Enter on page 7

* 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
10-19-2023	Connolly Printing	17B Gill Street Woburn, MA 01801	Signs	593.94
10-04-2023	Connolly Printing	17B Gill Street Woburn, MA 01801	Signs	472.28
05-25-2023	CTE Diana Dizoglio	30 Olive Street Methuen, MA 01844	Fundraiser	100.00
10-18-2023	CTE Nicholas Dizoglio	31 Lisa Lane Methuen, MA 01844	Fundraiser	100.00
10-17-2023	Donorbox	1520 Belle View Blvd. #4106 Alexandria, VA 22307	Fees associated with online contributions	73.31
10-18-2023	Sams Club	7 Walmart Blvd. Hudson, NH 03051	Senior Center Breakfast	104.66
10-17-2023	Staples Printing	167 S. Broadway Suite 5 Salem, NH 03079	Fundraiser Invitations	59.27
06-09-2023	The Hamilton Committee	8 Westwind Drive Methuen, MA 01844	Fundraiser	100.00
10-18-2023	Valley Patriot	75 Main Street North Andover, MA 01845	Advertising	1032.00
Line 12: Total Expenditures over \$50 (or listed above)				2635.46
Line 13: Total Expenditures \$50 and under* (not listed above)				86.08
Line 14: TOTAL EXPENDITURES IN THE PERIOD				2721.54

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 B: EXPENDITURES (continued)[illegible]

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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.

* 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
9/27/2017	Jana Zanni Pesce	16 Pine Tree Drive Methuen, Ma 01844	LOAN	100.00
10/05/2017	Jana Zanni Pesce	16 Pine Tree Drive Methuen, Ma 01844	LOAN	500.00
10/03/2021	Jana Zanni Pesce	16 Pine Tree Drive Methuen, Ma 01844	LOAN	1000.00
10/17/2021	Jana Zanni Pesce	16 Pine Tree Drive Methuen, Ma 01844	LOAN	1000.00
9/27/2023	Jana Zanni Pesce	16 Pine Tree Drive Methuen, Ma 01844	LOAN	3000.00
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				5600.00