

Tana

Zanni

Pesce



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECORDING OFFICE
METHUEN, MA

2025 DEC -3 AM 10:47

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/18/25 Ending Date: 11/24/25

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 Drive

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 Drive

Committee Mailing Address

E-mail: pesceforprogress@gmail.com

Phone #: 617 922-0865

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>3295.64</u>
Line 2: Total receipts this period (page 3, line 12)	<u>8627.44</u>
Line 3: Subtotal (line 1 plus line 2)	<u>11923.08</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>5813.38</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>6109.70</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>5600.00</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>0</u>
Line 9: Name of bank(s) used:	<u>Salem Cooperative 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: [Signature] (Treasurer's signature)

Date: 12/3/25

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: 12/3/25

SCHEDULE A: RECEIPTS

L.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 D 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)
10/26/25	Ambra, Mike 11 Muirfield Lane Methuen, MA 01844	100.00	
10/28/25	Antonelli, Greg 2 Ashley Court Lynnfield, MA 01940	150.00	
10/22/25	Aznoian, Peter 182 East Street Methuen, MA 01844	250.00	contractor, self
10/31/25	Bargoot, Albie 14 Pine Needle Road Wayland, MA 01778	100.00	
10/20/25	Bergeron, Kenneth 17 South Bowdoin Street Lawrence, MA 01843	100.00	
10/24/25	Bourapheal, Sylvia 7 Nugget Hill Road Salem, NH 03079	100.00	
10/23/25	Colarusso, Alessandro 20 B Gates Lane Wakefield, Ma 01880	200.00	Realtor, Colarusso Realty
10/23/25	Consoli, David 215 N. Lowell Street Methuen, MA 01844	100.00	
10/23/25	Cronin, Joseph 16 Rivers Edge Place Methuen, MA 01844	200.00	President, St. Anne's Home, Methuen
10/23/25	CTE Ron Marson 404A Pelham Street Methuen, MA 01844	100.00	
10/23/25	DiFiore, Raymond 18 Rebecca Way Methuen, MA 01844	100.00	
10/20/25	Dube, Kevin 16 Hampstead Street Methuen, MA 01844	250.00	unemployed

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/23/25	Eluszkiewicz, Maria 10 Pine Tree Drive Methuen, MA 01844	100.00	
10/23/25	Fairburn, Frederick 18 Riverview Ave. Methuen, MA 01844	250.00	Attorney, Self
10/23/25	Fiorante, Joseph 55 Blueberry Lane Methuen, MA 01844	100.00	
10/20/25	Foster, Maureen 12 Christopher Drive Methuen, MA 01844	100.00	
10/22/25	Hagger, Rndy 68 Old Yankee Road Haverhill, MA 01832	100.00	
10/23/25	Hashem, Ashley 6 Beechwood Drive Methuen, MA 01844	100.00	
10/23/25	Hashem, Saba 318 Broadway Methuen, MA 01844	100.00	
10/23/25	Johnson, Ed 50 Lowell Blvd Methuen, MA 01844	100.00	
10/22/25	Kaplan, Moises 1 Powder Mill Square #405 Andover, MA 01810	77.00	
10/19/25	Karras, Bill 7 Scarlet Court North Easton, MA 02356	250.00	Property Management, self
10/23/25	Kazanjian, George 55 Sevoian Drive Methuen, MA 01844	100.00	
10/19/25	Kim, Yeon 1 Flagg Road Westford, MA 01886	250.00	Attorney, Kim Law Office
10/31/25	Liccardi, David 20 Harold Street North Andover, MA 01845	100.00	
Line 10: Total Receipts over \$50 (or listed above)			<i>* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.</i>
Line 11: Total Receipts \$50 and under (not listed above)			
Line 12: TOTAL RECEIPTS IN THE PERIOD		cont	

← Enter on page 1, line 2

SCHEDULE A: RECEIPTS

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 \$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 D 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)
10/31/25	McDonough, Bryan 156 Jackson Street Methuen, MA 01844	100.00	
10/23/25	McNamara, Scott 16 Crestshire Drive Lawrence, MA 01843	200.00	Police Chief, City of Methuen
10/23/25	Methuen Police Patrolmans Association P.O. Box 425 Methuen, MA 01844	250	Union
10/23/25	Payano, Pavel 596 Haverhill Street Lawrence, Ma 01843	100.00	
10/22/25	Pesce, Jennifer 120 Mill Road Middleton, MA 01949	100.00	
10/23/25	Pesce, Rocco 24 Withrop Street Everett, MA 02149	250.00	unemployed
10/23/25	Reyes, Estela 94 Maple Street. Apt 2 Lawrence, MA 01841	100.00	
10/19/25	Rosario, Samuel 40 Fairmont Street Apt.2 Lawrence, MA 01841	70.00	
10/23/25	Rossi, Anthony 325 Heath Street Brookline, MA 02467	1000.00	Developer, Rossi Development
10/20/25	Rustum, Rami 1641 Salem Street North Andover, MA 01845	1000.00	Physician, Merrimack Valley Pain
10/22/25	Sheehy, John 15 Woodmeadow Drive Salem, NH 03079	300.00	unemployed
10/23/25	Soto, Neily 71 Comet Road 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)
10/20/25	Taranto, Michael 68 Greenwood Avenue Wakefield, MA 01880	100.00	
10/21/25	Tarshi, Paul 362 North End Blvd. Salisbury, MA 01952	100.00	
10/23/25	Toto, David 20 Ladyslipper Ave. Pelham, NH 03076	200.00	Fire Chief, City of Methuen
10/23/25	Valley Campaign Funds 21 Winstead Avenue Methuen, MA 01844	100.00	
10/23/25	Zanni, Jeffrey 76 Heritage Hill Rd. Windham, NH 03087	200.00	President, Integrum
Line 10: Total Receipts over \$50 (or listed above)		7797.00	<i>* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.</i>
Line 11: Total Receipts \$50 and under (not listed above)		830.44	
Line 12: TOTAL RECEIPTS IN THE PERIOD		8627.44	

← Enter on page 1, line 2

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 E. 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
10-21-25	Connolly Printing	17B Gill St Woburn, MA 01801	Signs	472.28
10-27-25	Friends Of DJ Beauregard	10 Fenwick Circle Methuen, MA 01844	Fundraiser	100.00
11/4/25	Postmaster	U.S. Postoffice Methuen, MA 01844	Stamps	105.45
10-31-25	Staples	167 S Broadway #5 Salem, NH	Advertising Materials	65.99
11/17/25	The Irish Cottage	17 Branch St Methuen, MA 01844	Fundraiser	800.00
10-30-25	The Valley Patriot	75 Main Street North Andover, MA 01845	Ad	125.00
10-20-25	Thriftco Printing	56 Pulaski St Peabody, MA 01960	Mailers	2111.15
10-27-25	Thriftco Printing	56 Pulaski St Peabody, MA 01960	Mailers	1577.01

Enter expenditure totals on Page 5

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)

5356.88

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

456.50

Line 15: TOTAL EXPENDITURES IN THE PERIOD

5813.38

SCHEDULE C: IN-KIND CONTRIBUTIONS

1.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 or 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.*

[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	0

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.

Date Incurred	To Whom Due	Address	Purpose	Amount
9/27/17	Jana Zanni Pesce	16 Pine Tree Drive Methuen, MA 01844	Loan	100.00
10/05/17	Jana Zanni Pesce	16 Pine Tree Drive Methuen, MA 01844	Loan	500.00
10/03/21	Jana Zanni Pesce	16 Pine Tree Drive Methuen, MA 01844	Loan	1000.00
10/17/21	Jana Zanni Pesce	16 Pine Tree Drive Methuen, MA 01844	Loan	1000.00
9/27/23	Jana Zanni Pesce	16 Pine Tree Drive Methuen, MA 01844	Loan	3000.00
Enter on page 1, line 7 →			Line 19: TOTAL OUTSTANDING LIABILITIES (ALL)	5600.00

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]