



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance



File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/15 Ending Date: 10/26/15

Type of Report: (Check one)

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

| |
|--|
| Thomas G. Ciulla |
| Candidate Full Name (if applicable) |
| Methuen -East District Councilor |
| Office Sought and District |
| 375 Merrimack Street, Unit 16, Methuen, MA 01844 |
| Residential Address |
| Telephone Number (optional): |

| |
|--|
| Committee to Elect Tom G. Ciulla |
| Committee Name |
| Angela Ciulla |
| Name of Committee Treasurer |
| 375 Merrimack Street, Unit 16, Methuen, MA 01844 |
| Committee Mailing Address |
| Telephone Number (optional): |

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

(63.02)

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

9,700.00

Line 3: Subtotal (line 1 plus line 2)

9,636.98

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

8,439.49

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

1,197.49

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

0

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

0

Line 8: Name of bank(s) used:

JEANNE D'ARC CREDIT UNION

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: Angela Ciulla (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: _____ (Candidate's signature)

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.

(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) |
|--|--|--------|---|
| 5/2/15 | CHARLES F PERRAULT 24 ARROWOOD ST METHUEN MA 01844 | 50.00 | |
| 5/2/15 | METHUEN FIREFIGHTERS LOCAL 1691 IAFU 01844 24 LOWELL ST, METHUEN, MA | 500.00 | METHUEN FIREFIGHTERS LOCAL 1691 |
| 7/21/15 | TERRANCE W. KENNEDY 512 BROADWAY EVERETT MA 02149 | 500.00 | ATTORNEY |
| 7/21/15 | SCOTT GEDIMAN 5 LAVALLEY AVE NEWBURY PORT MA 01850 | 500.00 | ATTORNEY |
| 7/28/15 | LIUNA - LOCAL 175 55 UNION ST METHUEN MA 01844 | 500.00 | LIUNA - LOCAL 175 |
| 6/25/15 | METHUEN POLICE PATROLMANS UNION METHUEN 90 HAMPSHIRE ST MA 01844 | 300.00 | METHUEN PATROLMANS UNION |
| 7/29/15 | METHUEN POLICE SUPPORT ASSOC ASSOC METHUEN PO BOX 789 MA 01844 | 300.00 | METHUEN POLICE SUPPORT ASSOC |
| 8/28/15 | CHARLES F. GILLESPIE 17 RUSSELL FARM RD METHUEN MA 01844 | 100.00 | |
| 8/28/15 | THOMAS CIULLA 103 A LAWRENCE RD SALEM NH 03079 | 50.00 | |
| 8/28/15 | RALPH V. SACRAMONE 13 WILFIELD CT EVERETT MA 02149 | 50.00 | |
| 8/30/15 | ALAN C. HOPE 370 GARAT POND RD NORTH ANDOVER, MA 01845 | 100.00 | |
| 8/31/15 | JAMES V DAMICOTI 50 RANGER RD WINDHAM, NH 03087 | 100.00 | |
| Line 9: Total Receipts over \$50 (or listed above) | | | ← Enter on page 1, line 2 |
| Line 10: Total Receipts \$50 and under* (not listed above) | | | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | | |

* 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) |
|--|--|--------|---|
| 9/6/15 | PRISCILLA P. SHAFER 2 ORVIND HILL AVE METHUEN, MA 01844 | 50.00 | |
| 9/13/15 | JAMES B ZENEVITCH JANICE R ZENEVITCH 5 MORGAN DR METHUEN MA | 50.00 | |
| 9/11/15 | JEFFERY ZANNI SARAH ZANNI 4 HAWKES BROOK LN MA 01844 | 50.00 | |
| 9/6/15 | CHERYL A MCCORMICK ESQ 9 KASSIOTIS LN MIDDLETON, MA 01949 | 50.00 | |
| 9/9/15 | MARY LOUISE FUSCO ANTHONY J FUSCO 01844 3 MYONA ST METHUEN MA | 50.00 | |
| 9/8/15 | DORFEN BLAISDELL LIAM BLAISDELL 01960 15 JACOBS ST PEABODY MA | 50.00 | |
| 9/3/15 | CHRISTOPHER J MAROUN 5 BUTTANWOOD DR METHUEN MA 01844 | 50.00 | |
| 9/3/15 | DANIEL LAMBONE PASSACANTILLI SUSAN R PASSACANTILLI 67 B COMMERCIAL AVE BOSTON MA 02110 | 50.00 | |
| 9/22/15 | SHARON M. POLLARD 5 EAST ST METHUEN, MA 01844 | 100.00 | |
| 9/22/15 | OFECIA CHAVEZ CARLOS CHAVEZ SR 01844 41 BOOTH RD METHUEN MA | 50.00 | |
| 9/22/15 | BARBARA A. TRACCHIA 12 BOURBON ST #24 PEABODY, MA 01960 | 50.00 | |
| 9/22/15 | CARMEN E. ADDESA EMELIA ADDESA 01844 39 WORCESTER ST METHUEN MA | 50.00 | |
| 9/21/15 | RAMSDEN PAINTING 9 SUMMER ST METHUEN MA 01844 | 50.00 | |
| Line 9: Total Receipts over \$50 (or listed above) | | | |
| Line 10: Total Receipts \$50 and under* (not listed above) | | | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | | ← 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) |
|--|---|--------|---|
| 9/22/15 | WILLIAM MANZI ELIZABETH C MANZI/0184 66 WOODBURN DR METHUEN MA | 50.00 | |
| 9/22/15 | JENNIFER KANMAN 103 GRANVIEW RD METHUEN MA 01844 | 50.00 | |
| 9/22/15 | DIANA FAY DIZOGLIO 672 WASHINGTON ST WELLESLEY MA 02482 | 50.00 | |
| 9/22/15 | LISA J YARLO PERRY 534 PROSPECT ST METHUEN MA 01844 | 50.00 | |
| 9/22/15 | JOHN C. O'BREMSKI JENNIFER L O'BREMSKI 55 HAWLEY RD MELROSE MA 02176 | 50.00 | |
| 9/22/15 | RANDY R. HAGGAR 68 OLD YANKEE RD HAVERHILL, MA 01832 | 200.00 | |
| 9/10/15 | KEVIN MATHONEY MARGERY MATHONEY 3 DEERFIELD ST SALEM NH | 400.00 | |
| 9/23/15 | WILLIAM HANNEFFANT THERESA HANNEFFANT 6 WAYEL ST METHUEN MA 01844 | 200.00 | |
| 9/22/15 | GREGORY J GAWANT SR 157 LOWELL RD SALEM, NH 03079 | 200.00 | |
| 9/22/15 | VIRGINIA CARME DAILEY PATRICK DAILEY 03149 5 MAPLEWOOD AVE EVERTON MA | 700.00 | |
| 9/22/15 | STEVE J SABA CATHERINE B. SABA 15 CITRUS LANE METHUEN MA 01844 | 200.00 | |
| 9/22/15 | COMMITTEE MURPHY STEVE 2 AMI 70 SEVIAN DR METHUEN MA 01844 | 400.00 | |
| Line 9: Total Receipts over \$50 (or listed above) | | | |
| Line 10: Total Receipts \$50 and under* (not listed above) | | | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | | ← 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) |
|--|---|--------|---|
| 9/22/15 | LEAH E MCMENAMON THOMAS F. MCMENAMON JR 3 PORTER AVENUE METHUEN MA 01844 | 100.00 | |
| 9/22/15 | ADAM CITIOLCA 8 MARIST METHUEN MA 01844 | 100.00 | |
| 9/10/15 | FRANK KORN 90 HAMPSHIRE ST METHUEN MA 01844 | 100.00 | |
| 9/22/15 | LANNI AND PESCE (law office) 235 MERRIMACK ST METHUEN MA 01844 | 100.00 | |
| 9/22/15 | THOMAS R. LUSSIER 5 EAST ST METHUEN MA 01844 | 100.00 | |
| 9/22/15 | EMILE A. MAROUN P.O. Box 471 METHUEN MA 01844 | 200.00 | GEORGES BAKERY BAKER |
| 9/22/15 | GEORGE E. MAROUN 10 THAYER ST METHUEN MA 01844 | 200.00 | GEORGES BAKERY BAKER |
| 9/9/15 | CARPENTERS UNION LOCAL NO. 111 PAC UNIT 215 01844 13 BRANCH ST METHUEN MA | 250.00 | CARPENTERS LOCAL 111 |
| 9/25/15 | FREDRICK A. BALBONI JR 16 CLARK RD WEST PEABODY MA 01960 | 50.00 | |
| 9/11/15 | CRAIG R MISCH ESQ 100 EVERETT AVE UNIT 3 CHELSEA MA 02150 | 50.00 | |
| 9/12/15 | KATHLEEN R TWOMEY THOMAS L TWOMEY 14 DUTTON CIR MERRIFIELD MA 01855 | 50.00 | |
| 9/22/15 | JOSEPHINE UNIS RONALD W PARINO MA 01844 12 EMERY AVE METHUEN | 200.00 | OWNER OF VALLEY TOWING |
| 9/22/15 | CYNTHIA WOLSKIE ROBERT E WOLSKIE 01844 94 ASHLAND AVE METHUEN MA | 75.00 | |
| Line 9: Total Receipts over \$50 (or listed above) | | | |
| Line 10: Total Receipts \$50 and under* (not listed above) | | | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | | ← 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) |
|---------------|---|--------|---|
| 9/22/15 | ROBERT P. GALLO NATALIE GALLO 01864 177 NORTH ST. READING MA | 75.00 | |
| 9/29/15 | BRYAN E CHASE 2 STRAWBERRY LANE METHUEN MA 01844 | 100.00 | |
| 9/30/15 | STEVEN A. BADOOR ANN BADOOR METHUEN 20 MAPLE RIDGE MA 01844 | 100.00 | |
| 9/30/15 | NICHOLAS PELLEGRINO SR CHRISTINE PELLEGRINO MA 36 WINTHROP ST WEST BURY 01581 | 100.00 | |
| 9/25/15 | SEAN FOUNTAIN 934 PROSPECT ST METHUEN MA 01844 | 50.00 | |
| 10/16/15 | ANTHONY RUSSI 75 WILLIAMS ST CHILSEA MA 02150 | 100.00 | |
| 10/14/15 | HENRY TORRONEO JAMIE L TORRONEO P.O. BOX 2308 METHUEN MA 01844 | 250.00 | OWNER OF TORRONEO INDUSTRIES |
| 10/10/15 | ROLAND D HUGHES 54 LINDENWOOD RD STONEHAM MA 02180 | 100.00 | |
| 10/23/15 | SEIU LOCAL 888 52 ROLAND ST SUITE 101 CHARLESTOWN MA 02129 | 500.00 | SEIU LOCAL 888 UNION |
| 10/21/15 | ROBERT A LAROCHELLE DIANA LAROCHELLE 03804 180 OCEAN BLVD SEABOARD NH | 50.00 | |
| 9/25/15 | METHUEN POLICE SUP OFFICERS ASSOC MA P.O. BOX 789 METHUEN 01844 | 200.00 | METHUEN POLICE SUP |
| 10/15/15 | KEVIN BARRY 17 HOUSTON AVE METHUEN MA 01844 | 250.00 | FIRE FIGHTER CITY OF METHUEN |
| | | | |

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

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

Line 11: TOTAL RECEIPTS IN THE PERIOD

← 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 |
|-----------|--|---|-------------------------------|----------|
| 8/3/15 | FEARON O'TOOLE DATA FOR DONKEYS | 97 R FRANKLIN ST SOMERVILLE MA 02145 | ONLINE SERVICES | 1,250.00 |
| 8/17/15 | VOGEL PRINTING | 300 CANAL ST LAWRENCE MA 01840 | INVITATIONS | 309.18 |
| 8/17/15 | TOM CIULLA | 375 MERRIMACK ST F16 METHUEN MA 01844 | STAMPS | 140.00 |
| 8/26/15 | FEARON O'TOOLE DATA FOR DONKEYS | 97 R FRANKLIN ST SOMERVILLE MA 02145 | ONLINE SERVICES | 500.00 |
| 9/8/15 | MASSACHUSETTS DEMOCRATIC PARTY | 77 SUMMER ST BOSTON MA 02110 | DATABASE | 500.00 |
| 10/3/15 | JUST YARD SIGNS COM | 4880 A6 DISTRIBUTION CT ORLANDO FL 32882 | SIGNS | 296.25 |
| 10/7/15 | FEARON O'TOOLE DATA FOR DONKEYS | 97 R FRANKLIN ST SOMERVILLE MA 02145 | ONLINE SERVICES | 500.00 |
| 10/16/15 | CONNOLLY PRINTING | 17 BILL ST WOBURN MA 01801 | MAILING | 3,592.90 |
| 10/17/15 | ROMANOS PIZZA | 301 MERRIMACK ST F16 METHUEN MA 01844 | FUNDRAISER | 661.86 |
| 10/17/15 | VALLEY PATRIOT INC | 75 MAIN ST MA NORTH ANDOVER 01855 | AD | 175.00 |
| 10/17/15 | DEMOCRACY ENGINE | 2125 14TH ST NW WASHINGTON DC 20009 | CREDIT CARD PROCESSING FEE | 14.30 |
| | | | | |

Line 12: Total Expenditures over \$50 (or listed above)

8,439.49

Line 13: Total Expenditures \$50 and under* (not listed above)

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD

8,439.49

* 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 |
|---------------------------|---------------------|---------------------|--|-------|
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| | | | Line 15: In-Kind Contributions over \$50 (or listed above) | |
| | | | Line 16: In-Kind Contributions \$50 & under (not listed above) | |
| Enter on page 1, line 6 → | | | Line 17: TOTAL IN-KIND CONTRIBUTIONS | 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 |
|---------------------------|-------------|---------|--|--------|
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| Enter on page 1, line 7 → | | | Line 18: TOTAL OUTSTANDING LIABILITIES (ALL) | |
| | | | 0 | |