Commonwealth of Massachusetts

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

2013 SEP - 8 5 LYNN ELECTION OFFICE

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 6/7/13 Ending Date: 9/3/13

Type of Report: (Check one)

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

DIANNA CHAKOUTIS
Candidate Full Name (if applicable)

WARd 5 COUNCILOR
Office Sought and District

39 Thistle ST LYNN MA 01905
Residential Address

Telephone Number (optional):

COMMITTEE TO ELECT DIANNA CHAKOUTIS
Committee Name

Kathy Reece
Name of Committee Treasurer

39 Thistle ST LYNN MA 01905
Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	-0-
Line 2: Total receipts this period (page 3, line 11)	$4,123.00
Line 3: Subtotal (line 1 plus line 2)	$4,123.00
Line 4: Total expenditures this period (page 5, line 14)	$2,314.79
Line 5: Ending Balance (line 3 minus line 4)	$1,808.21
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:	EQUITABLE 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: Kathy Reece (Treasurer's signature) Date: 9/3/13

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: Dianna Chakoutis (Candidate's signature) Date: 9/3/13

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)
5/22/13	Angela Cahill 20 Belleaire Ave Lynn MA 01904	$ 100.00	
5/23/13	James Chalmers 72 Keslar Ave Lynn MA 01905	$ 100.00	
7/28/13	Committee to Elect William Trahant 215 Verona St Lynn MA 01904	$ 100.00	
5/21/13	Marjorie Crosby 34 Thistle St Lynn MA 01905	$ 100.00	
5/22/13	Nicholas Decoulos 7 Felton Terr Peabody MA 01960	$ 100.00	
5/22/13	Susan Mullos 9 The Greenway Middleton MA 01949	$ 100.00	
5/22/13	Charles Panias 25 Magner Rd Lynn MA 01905	$ 100.00	
8/1/13	Dorothy Panias 25 Magner Rd Lynn MA 01905	$ 100.00	
5/22/13	Ernest Panias 41 Lockwood Rd Lynn MA 01904	$ 100.00	
6/14/13	Andrew Perkins 179 Lewis St Lynn MA 01902	$ 500.00	Trustee Perkins Properties
5/22/13	David Solimine Jr 426 Broadway Lynn MA 01904	$ 100.00	
5/22/13	Mary Wright 41 Woodlawn St Lynn MA 01904	$ 100.00	

Line 9: Total Receipts over $50 (or listed above)	1,600.00	
Line 10: Total Receipts $50 and under* (not listed above)	2,523.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD	4,123.00	← 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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)
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
7/25/13	Daily item	38 Exchange St Lynn MA 01901	Fundraiser Advertisement	208.00
7/3/13	Home Depot	564 Broadway Saugus MA 01906	Wood for Yard signs	99.45
5/15/13	Park Press Printers	15-17 Main St Saugus MA 01906	Bumper Stickers	606.00
4/26/13	Postcards.com	9655 DeSoto Ave Chatsworth, CA 91311	Fundraiser event tickets	53.12
9/2/13	Staples	444 Broadway Saugus MA 01906	Printer ink	58.43
6/24/13	Thristco	26 Howley St Peabody MA 01960	Yard signs	150.00
7/2/13	Thristco	26 Howley St Peabody MA 01960	Yard signs	211.25
7/19/13	Thristco	26 Howley St Peabody MA 01960	Palm and dear friend cards	275.00
7/25/13	Thristco	26 Howley St Peabody MA 01960	Palm and Dear Friend cards	424.31

Line 12: Total Expenditures over $50 (or listed above)	2,085.56
Line 13: Total Expenditures $50 and under* (not listed above)	229.23
Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD**	2,314.79

* 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)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		Line 12: Expenditures over $50 (or listed above)		
		Line 13: Expenditures $50 and under* (not listed above)		
		Line 14: TOTAL EXPENDITURES IN THE PERIOD		

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 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
		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

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)** – 0 –