



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

LYNN ELECTION OFFICE

2013 SEP -9 P 12:09

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-13 Ending Date: Sept. 9 13

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

Richard Colucci
Candidate Full Name (if applicable)

Council WBY
Office Sought and District

265 Ocean St Lynn
Residential Address

Telephone Number (optional): 781 595 3048

Colucci Committee
Committee Name

Leslie Colucci
Name of Committee Treasurer

265 Ocean St Lynn
Committee Mailing Address

Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>8160.14</u>
Line 2: Total receipts this period (page 3, line 11)	<u>5174.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>13334.14</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>2370.69</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>10,963.45</u>
Line 6: Total in-kind contributions this period (page 6)	_____
Line 7: Total (all) outstanding liabilities (page 7)	_____
Line 8: Name of bank(s) used:	<u>Eastern 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: Leslie A. Colucci (Treasurer's signature) Date: 9/8/13

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: [Signature] (Candidate's signature) Date: 9/8/13

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)
6/6/13	Ralph Cronin	100	
"	HARIB RAHMAN	100	
"	ANDREW PURKINS SWAMPSCOTT	500	Realtor
"	ART Scangus	100	
"	DAVE Solomine	100	
"	Lenny D Orlando Lynnfield ma	100	Realtor
	Doug Hyde Lynn	200	Realtor
	John Berdard Swampscott	500	Realtor
	Leo Abujen Lynn	200	Business owner
	Zach Andrewst Swampscott	200	Real estate
	Omar Calou Mable Head	100	
	ROBERT FIOCCOPRITE Lynn	100	
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.

MEMORANDUM FOR THE RECORD

DATE: 10/15/54
 TO: SAC, NEW YORK
 FROM: SAC, PHOENIX
 SUBJECT: [Illegible]

[Illegible]	100	[Illegible]
[Illegible]	101	[Illegible]
[Illegible]	102	[Illegible]
[Illegible]	103	[Illegible]
[Illegible]	104	[Illegible]
[Illegible]	105	[Illegible]
[Illegible]	106	[Illegible]
[Illegible]	107	[Illegible]
[Illegible]	108	[Illegible]
[Illegible]	109	[Illegible]
[Illegible]	110	[Illegible]
[Illegible]	111	[Illegible]
[Illegible]	112	[Illegible]
[Illegible]	113	[Illegible]
[Illegible]	114	[Illegible]
[Illegible]	115	[Illegible]
[Illegible]	116	[Illegible]
[Illegible]	117	[Illegible]
[Illegible]	118	[Illegible]
[Illegible]	119	[Illegible]
[Illegible]	120	[Illegible]

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	MURPHY TENNEY LYNN	100	
	RICHARDS FORTUCCI LYNN	100	
	BILL ANDREWS, NEHET	100	
	SIAN THAI COMWELL ST LYNN	100	
	JAMES MURSH	100	
	GORDON COON	100	
	CHRIS BUSBY	100	
	KEN CORPIN	100	
	NICK MENARD	250	Construction Business
	JAMES COWSELL	100	
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
3/1/13	RICH VIGOR		Donation Stuffed	50
2/21/13	ST STEPHENS	30 Brimmer St	"	100
3/22/13	Travel Lynnbrook	LSD	Donation	100
3/26/13	OLD TIME REST.	Boston St	Donation	25
5/5/13	Lynn Hosp. Food.		Donation	100
5/8/13	Enjoy LIQUOR	53 Union St	Wine for Museum Function	120-
5/20/13	W.E. Leatherbooks		Toilets High Rock 4th fl.	172.19
5/20/13	JIT Prices		High Rock Doughs Depent	100
5/23/13	F Gilbert	Peabody	Printing	50
5/23/13	Post OFFICES	Dart Team	STAMPS	138.00
6/6/13	OLD Time Rest.	Boston St	Fuel Beacon Hall	260.50
6/18/13	Relief for Life	Red Rock	Donation Cane	100
Line 12: Total Expenditures over \$50 (or listed above)				2345.69
Line 13: Total Expenditures \$50 and under* (not listed above)				25.00
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				2370.69

* 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
6/18/13	Bro Table	Downtown	Donation	50-
7/13/13	J+J Ponies		James High Road 4	440.
7/3/13	Georges PIZZA	Broad St	PIZZA 4th 13	110-
7/3/13	DAVE Hill	Prince St. Lynn	Minute Man Impersonator	50
7/3/13	J. D. Varen		Paint Face High Rock 4 th	75
7/24/13	HATION Relief		Donation	50-
7/24/13	St Stevens	So Street	Donation	100
7/27/13	Colin Signs	Jayce St	Signs	183

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

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

Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD** []

* 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)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				

* 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)				