



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2011 OCT 31

SECRETARY OF THE TREASURY

File with: City or Town Clerk or Election Commission Please print or type all information, except signatures.

Fill in dates: Reporting Period Beginning June 17 2011 Ending October 19 2011

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

Larry GIUNTA, Jr.
Full Name of Candidate (if applicable)
Councilor at Large
Office Sought and District
139 Crow Lane Nbpt. Ma
Residential Address
Tel. No. (optional)

Committee to Elect Larry Giunta
Committee Name
Michael E. Fernick
Name of Committee Treasurer
139 Crow Lane Nbpt, Ma. 01950
Committee Mailing Address
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>00.00</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>4,357.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>4,357.00</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>1,297.13</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>3,059.87</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>103.94</u> <i>JMK</i>
Line 7: Total (all) outstanding liabilities (page 4)	\$ _____
Line 8: Name of bank(s) used	<u>NCW60-4 PORT ST SAVINGS</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.
Michael E. Fernick, Jr. Signed under the penalties of perjury: 10-25-11
Treasurer's signature (in ink) Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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 signature (in ink) 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.

This page may be copied 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)
8/3/11	XXXXXXXXXX TERRANCE ASHE 10 Lavalley Lane XXXXXXXXXX	100 00	
7/25/11	WILLIAM BRADLEE 33 MIDDLE STREET	100 00	
9/17/11	DEANNA & KEVIN BURKE 129 MERRIMAC ST. UNIT 6	100 00	
7/22/11	ANNE BURRIDGE 14 DOROTHY LUCEY DRIVE	100 00	
8/12/11	F. ARTHUR CHAISSON 300 MERRIMAC STREET	100 00	
7/22/11	James & GRACE CONNOLLY 47 GREEN STREET	100 00	
8/15/11	MICHAEL CRONAN 17 SHANDEL DRIVE	100 00	
7/22/11	PAUL DAHN 343 HIGH STREET	100 00	
6/8/11	MICHAEL FERRICK 8 BROMFIELD COURT	200 00	RETIRED
7/22/11	SCOTT & CHRISTINE FRISCH 7 VIRGINIA LANE	100 00	
7/22/11	KAREN HODGE 186 HIGH STREET	100 00	
6/15/11	KATHLEEN & RICHARD HOLDON 338 MERRIMAC STREET	100 00	
	XXXXXXXXXX XXXXXXXXXX		
7/22/11	LENNY MIRRA 6 MIRRA STREET WEST NEWBURY	100 00	
7/25/11 8/13/11	HELEN MOORADKANIAN 54 THIRD STREET NORTH ANDOVER, MA	200 00	RETIRED (deposits of \$1000)
Line 9:	Total receipts in excess of \$50 (or listed above)	\$ 2530 00	
Line 10:	Total receipts \$50 and under* (not listed above)	1827 00	
Line 11:	TOTAL RECEIPTS IN THE PERIOD	4357 60	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.
Page 2

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.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value	
8/15/11	ORANGE COUNTY DISTRICT FOR 2000	200 WEDGEMAN ROAD	200 WEDGEMAN ROAD	200 WEDGEMAN ROAD	
8/15/11	DAN TOUMARARNE	SARGENT ROAD CONWAY N.H.	Bumper STICKERS	\$ 89.95 ^{89.95}	
				Line 15: In-kind over \$50	89.95
				Line 16: In-kind \$50 and under	13.99
				Line 17: Total In-kind	103.94 ^{103.94}

Enter on page 1, line 6

* 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	
				Line 18: OUTSTANDING LIABILITIES (ALL)	—

Enter on page 1, line 7

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This page may be copied 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)
7/25/11 8/13/11	DR. RICHARD MOORAD KANIAN 54 THIRD STREET NORTH ANDOVER	200	00	DOCTOR - RETIRED (2 DEPOSITS OF \$100.00)
4/14/11	NEWBURYPORT REPUBLICAN COMMITTEE	100	00	
8/13/11	LESTER SIMON 8 RIVER ROAD MERRIMACK, MA	100	00	
9/19/11 8/14/11	Bob Siagle 126 MERRIMACK STREET UNIT 48	200	00	RETIRED (2 DEPOSITS OF \$100.00)
7/20/11	RICHARD TISEI LYNNFIELD 590 MAIN STREET # A	150	00	REALTOR - NORTHUP ASSOC
9/11/11	ALEXANDER VERAS 21 17TH AVENUE HAVERTHILL	100	00	
7/22/11 8/13/11 9/16/11	ELAINE ANDRA LOUIS 65 CLIPPER WAY	80	00	RETIRED
Line 9: Total receipts in excess of \$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.