



# Form CPF M 102: Campaign Finance Report

CITY OF GLOUCESTER, MA  
Office of Campaign and Political Finance

CITY CLERK  
GLOUCESTER

15 OCT 26 PM 3:03

15 OCT 26 PM

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/15 Ending Date: 10/16/15

Type of Report: (Check one)

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

Joseph M. Orlando, Jr.  
Candidate Full Name (if applicable)  
Gloucester City Councilor - At-Large  
Office Sought and District  
5 Western Ave, Gloucester, MA 01930  
Residential Address  
Telephone Number (optional):

The Orlando Committee  
Committee Name  
Amanda O. Kesterson  
Name of Committee Treasurer  
293 Washington St. Gloucester, MA 01930  
Committee Mailing Address  
Telephone Number (optional):

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>N/A</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$ 5,881.26</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$ 5,881.26</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$ 4,059.70</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$ 1,821.56</u>
Line 6: Total in-kind contributions this period (page 6)	<u>\$ 1,408.20</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>\$ 192.-</u>
Line 8: Name of bank(s) used:	<u>Santander 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: Amanda O. Kesterson (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 contribution 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: 10/26/15

**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)
9/17/15	Wes Fornerd 55 FORTS <sup>g</sup> . #4 GLOUCESTER, MA 01930	\$ 50.-	
9/17/15	William Holloway 17 Main St. Apt. 6 GLOUCESTER, MA 01930	\$ 25.-	
9/17/15	Cathy Hunt 51 Beacon St. GLOUCESTER, MA 01930	\$ 20.-	
9/18/15	Paul + Debbie Muniz 13 Brantside Ave. GLOUCESTER, MA 01930	\$ 25.-	
9/17/15	Geraldine Noble 88 Pleasant St. GLOUCESTER, MA 01930	\$ 25.-	
9/17/15	Steve + Dee Noble 20 Reynard St. GLOUCESTER, MA 01930	\$ 100.-	
9/18/15	Catherine Orland 13 Church St. GLOUCESTER, MA 01930	\$ 25	
9/17/15	Doug Parsons 1047 Washington St. GLOUCESTER, MA 01930	\$ 20	
9/17/15	Michelle Peliz 8234 Avalon Drive Wilmington, MA 01887	\$ 25.-	
9/17/15	Dave Pratt 17 Warner St. GLOUCESTER, MA 01930	\$ 25.-	
9/17/15	Jenna Robicheau 20 Honeysuckle Rd. GLOUCESTER, MA 01930	\$ 25.-	
9/18/15	Michael Rubin 58 Warner St. GLOUCESTER, MA 01930	\$ 10	
Line 9: Total Receipts over \$50 (or listed above)		12	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$ 375.-	← 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)
9/10/15	William Bejien 8 Maple St. Watertown, MA 02472	\$50.-	
9/17/15	Mark Celieta 3402 Kirkbnde Drive Dartmouth, MA 01923	\$100.-	
9/4/15	Thomas + Joanne Curcum 7 Stage Fort Ave. Gloucester, MA 01930	\$50.-	
9/17/15	Kimberly Fortier 530 Bridge St. S. Hamilton,	\$25.-	
9/8/15	Ronald + Alina Gamm 209 Atlantic Rd. Gloucester, MA 01930	\$50.-	
9/12/15	Peter Giordano 3 Castle Hill Rd. Gloucester, MA 01920	\$50.-	
9/12/15	Peter Giordano 9 Riverview Rd. Gloucester, MA 01930	\$50.-	
9/8/15	Patrick Henaghen 119 Third St. Medford, MA 02155	\$25.-	
9/4/15	Christine + Stanton Hull 88 Western Ave. Gloucester, MA 01930	\$25.-	
9/10/15	Paul + AnnJo Jackson 21 Salt Island Rd. Gloucester, MA 01930	\$200.-	Retired.
9/15/15	Joanne MacInnis 3 Frankwood Ave. Beverly, MA 01915	\$25.-	
9/5/15	John Novello 13 Goodwin Rd. Gloucester, MA 01930	\$100.-	
9/9/15	Jonathan + Marilyn Pratt 218 Bray St. Gloucester, MA 01930	\$25.-	
Line 9: Total Receipts over \$50 (or listed above)		13	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$775.-	← 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)
	Frank Aiello 17 Woodman St. Gloucester, MA 01930	\$250.-	Self Employed. Race Key
8/23/15	Vince Bertolino 18 Mt Pleasant Ave Gloucester, MA 01930	\$25.-	
8/24/15	Eric + Erin Byrne 61 Richardson Rd. Lynn, MA 01904	\$100.-	
8/31/15	Peter + Maria Cannavo 6 Summer St. Gloucester, MA 01930	\$40.-	
8/27/15	Stephen + Faye Cooney 32 Macomber Rd. Gloucester, MA 01930	\$50.-	
8/27/15	Glou. Republican City Comm. PO Box 463 Gloucester, MA 01930	\$200	Political Committee Contribution
8/30/15	Regina + John Long 40 Blynnan Ave Gloucester, MA 01930	\$25.-	
8/25/15	Rosario + Lorraine Milone 45 Englewood Rd. Gloucester, MA 01930	\$25.-	
8/20/15	Phyllis Orlando 11 Church St. Gloucester, MA 01930	\$100.-	
9/2/15	Wesley Regan 16 California St. # 2 Amesbury, MA 01913	\$30.-	
8/22/15	Norma + Lucy Russo 26 Church St. Gloucester, MA 01930	\$100.-	
8/24/15	Sheila Ryder 64 Riverview Rd. Gloucester, MA 01930	\$25.-	
8/28/15	Luciano + Susan Sappin 6 Angle St. Gloucester, MA 01930	\$25.-	
Line 9: Total Receipts over \$50 (or listed above)		13	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$995.-	← 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)
8/18/15	Anthony Bertolino 132 Bass Ave. Gloucester, MA 01930	\$100.-	
8/17/15	Cristina Bueggeman 457 Washington St. #6 Gloucester, MA 01930	\$50.-	
8/17/15	Vito + Josephine Calomo 82 Holly St. Gloucester, MA 01930	\$25.-	
8/21/15	Linda Charpentier 4 St. Joseph's Lane Gloucester, MA 01930	\$100.-	
8/16/15	Brendan + Vionette Chippenni 7 Orchard St. Gloucester, MA 01930	\$25.-	
8/15/15	Nate + Samantha Dranon 11 Atlantic St. Gloucester, MA 01930	\$100.-	
8/17/15	Constance Grayson 20 Vassar Rd. Marblehead, MA 01945	\$25.-	
8/17/15	Marian Haselgard 12 N. Kirby St. Gloucester, MA 01930	\$40.-	
8/17/15	Amsi Morales Lopez 53 Steigh Rd. Chelmsford, MA 01824	\$50.-	
8/18/15	Edward + Thelma Parks 73 Gloucester Ave Gloucester, MA 01930	\$50.-	
8/20/15	Jim + Nina Perry 1 Stony St. Tollport, MA 01966	\$50.-	
8/14/15	Ralph Pino 46 Middlest. Gloucester, MA 01930	\$25.-	
8/18/15	Mary Russo 35 Summer St. Gloucester MA 01930	\$100.-	
Line 9: Total Receipts over \$50 (or listed above)		13	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$740.-	← 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)
8/10/15	Cristina Buegge man 457 Washington St. # 6 Gloucester, MA 01930	\$50.-	
7/25/15	Andrew Butler 22 Millet St. Gloucester, MA 01930	\$50.-	
7/29/15	David + Elizabeth Coppola 9 Springs St. Unit 2 Salem, MA 01970	\$100.-	
7/30/15	Frank Cousins 1 Memorial St. Unit 14 Newburyport, MA 01950	\$100.-	
7/23/15	Rosanna Floyd 23 Rockwood Hts. Rd. Gloucester, MA 01930	\$100.-	
8/4/15	Glou. Repub. City Committee PO Box 403 Gloucester, MA 01930	\$250.-	Political Committee Donation
7/29/15	Thomas Lanic PO Box 14 Manchester, MA 01944	\$100.-	
7/24/15	John Nicastro 9 Lathrop Farm Circle Rockport, MA 01966	\$100.-	
8/10/15	LUKE NOWE 347A Washington St. Gloucester, MA 01930	\$150.-	
8/10/15	Joseph + Connie Orlando 5 Western Ave. Gloucester, MA 01930	\$266.26	Attorney + Bookkeeper Orlando & Associates
7/23/15	Joseph Orlando Jr. 5 Western Ave. Gloucester, MA 01930	\$25.-	
7/25/15	Michael Rubin 58 Warner St. Gloucester, MA 01930	\$10.-	
9/17/15	Douglas Silva 3402 Lyrlbriar Drive Danvers, MA 01923	\$50.-	
Line 9: Total Receipts over \$50 (or listed above)		13	
Line 10: Total Receipts \$50 and under* (not listed above)			
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		<b>1351.26</b>	← 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)
9/18/15	Thomas Brancaleone 17 Western Ave Gloucester, MA 01930	\$50.-	
9/19/15	Emmy Cutler 65 Holly St - Gloucester, MA 01930	\$20.-	
9/17/15	Will Franchard 24 Hartz St. Gloucester, MA 01930	\$50.-	
9/17/15	Toni Gelsomini 90 Nautilus Rd. Tewksbury, MA 01876	\$50.-	
9/17/15	Thomas + Marianne Kirdy 246 Western Ave. Gloucester, MA 01930	\$100.-	
9/18/15	Mara + Gino Locold 20 Addison St. Gloucester, MA 01930	\$25.-	
9/17/15	Tim + Sheila Logue PO Box 419 Manchester, MA 01944	\$50.-	
9/17/15	Brian + Michelle McCormick 109 Choke St. Essex, MA 01929	\$100.-	
10/1/15	Michael McGrory 10 Stone Rd. Waltham, MA 02453	\$50.-	
9/17/15	Lucille + Frank Militello 28 Chapel St. Gloucester, MA 01930	\$25.-	
9/20/15	Charles Nanath's 8 Banning Ridge Row Manchester, MA 01944	\$75.-	
10/1/15	Thomas Nolan 32 Norman Ave. Gloucester, MA 01930	\$25.-	
9/13/15	Kevin + Linda Smith 36 Everett St. Beverly, MA 01915	\$50.-	
Line 9: Total Receipts over \$50 (or listed above)		13	
Line 10: Total Receipts \$50 and under* (not listed above)			
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		\$670.-	

← 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)
9/17/15	Rick Bitten Court 5 Butler Ave Unit 2 Danvers, MA 01923	\$50.-	
9/17/15	Pietro + Maria Cannavo 1 Maple St. Gloucester, MA 01930	\$100.-	
9/17/15	Carla Cracchiolo 113 Cherry St. Gloucester, MA 01930	\$50.-	
9/16/15	Linda Devoe 24 Gloucester Ave. Gloucester, MA 01930	\$25.-	
9/17/15	Daniel + Eleanor Fishman 36 Colgate Rd. Beverly, MA 01915	\$25.-	
9/16/15	Doug + Kathryn Goodick 10 Doughton Rd. Gloucester, MA 01930	\$50.-	
9/17/15	Jonathan + Amber Kasper 94 Prospect St. Amesbury, MA 01913	\$25.-	
9/15/15	Thomas Lince PO Box 14 Manchester, MA 01944	\$100.-	
9/17/15	Geri + Tony Parisi 6 St. Anthony's Ln. Gloucester, MA 01930	\$100.-	
9/17/15	Mananne + John Peterson 3 Briar Neck Ave Gloucester, MA 01930	\$25.-	
9/17/15	John + Joanne Randazzo 151 Hesperus Ave. Gloucester, MA 01930	\$100.-	
9/17/15	Steve + Lisa Smit 8 Briar Rd. Gloucester, MA 01930	\$200	Self Employed Wine Distributor
9/18/15	Geoffrey + Patricia Watson 119 Phillips Ave Rockport, MA 01966	\$50.-	
Line 9: Total Receipts over \$50 (or listed above)		13	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$900.-	← 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)
10/15/15	James + Cecilia Coraza 4 Naomi Drive Gloucester MA 01930	\$50.-	
9/17/15	Michael Zubin 58 Warner St. Gloucester MA 01930	\$25.-	
Line 9: Total Receipts over \$50 (or listed above)		2	
Line 10: Total Receipts \$50 and under* (not listed above)			
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>		\$75.-	← 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 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
10/1/15	The Gloucester House	63 Roger St. Glou, MA 01930	Kickoff	\$1637.-
9/1/15	The Gloucester Times	50 Whittemore St. Glou, MA 01930	Ad Note	\$494.68
8/31/15	Glou. United Methodist Church.	436 Washington St. Glou, MA 01930	Meet + Greet	\$60.-
9/2/15	Jungle, Inc.	45 S. Main St. Ipswich, MA 01921	Signs	\$843.14
9/9/15	K+D Signs	PO Box 211 Roulet, MA 01966	Large Signs	\$602.-
8/11/15	Amanda Kesteron	293 Washington St. Glou, MA 01930	Reimbursement for Cards + Stamps.	\$206.26
7/27/15	Paypal	PO Box 5138 Timonium, MD 21094	Recon Online Donations	6.62
8/14/15	Topside Grill	50 Rogers St. Gloucester, MA 01930	Meet + Greet	\$150.-

Line 12: Total Expenditures over \$50 (or listed above)	8
Line 13: Total Expenditures \$50 and under* (not listed above)	
<b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>	<b>4,059.70</b>

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 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
8/1/15	Joseph M. Orlando Jr.	5 Western Ave. Gloucester, MA 01930	Facebook Ad	\$25.-
9/21/15	Joseph M. Orlando	5 Western Ave. Gloucester, MA 01930	Photographer	150.-
9/15/15	Connie Orlando	5 Western Ave. Gloucester, MA 01930	Balloons	\$13.72
9/14/15	Amanda Kesterson	293 Washington St. Gloucester, MA 01930	Buttons	\$84.37
9/1/15	Joseph M. Orlando, Jr.	5 Western Ave. Gloucester, MA 01930	Facebook Ad	\$25.-
7/23/15	Joseph Orlando	5 Western Ave. Gloucester, MA 01930	Cards	\$305.72
8/6/15	Joseph Orlando Jr.	5 Western Ave. Gloucester, MA 01930	Envelopes	\$14.65
9/9/15	Connie Orlando	5 Western Ave. Gloucester, MA 01930	Stamps	\$70.-
8/9/15	Amanda Kesterson	293 Washington St. Gloucester, MA 01930	Envelopes	\$25.17
8/20/15	Joseph Orlando Jr.	5 Western Ave. Gloucester, MA 01930	Cards	\$73.57
8/11/15	Amanda Kesterson	293 Washington St. Gloucester, MA 01930	Stamps	\$182.-
10/1/15	Joseph Orlando Jr.	5 Western Ave. Gloucester, MA 01930	Facebook Ad	\$25.-
Line 15: In-Kind Contributions over \$50 (or listed above)				12
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Line 17: TOTAL IN-KIND CONTRIBUTIONS				1,104.20

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 C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may 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
6/15/15	Joseph Orlando Jr.	5 Western Ave. Gloucester, MA 01930	2 Banners	\$204.-
6/20/15	Jon Goodhue	12911 Dale St. #65 Garden Grove, CA 92841	Logo	\$100.-
Line 15: In-Kind Contributions over \$50 (or listed above)				2
Line 16: In-Kind Contributions \$50 & under (not listed above)				
<b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>				<b>\$304.-</b>

\* 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
10/1/15	K+D Signs + Lettering	PO BOX 211 Rollingford, MA 01906	Large Signs	\$192.-

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)** \$192.-