



Form CPF M 102: Campaign Finance Report Municipal Form

Commonwealth
of Massachusetts

Office of Campaign and Political Finance

Received
Worcester City Clerk

File with: City of Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10-31-23 Ending Date: Jan 22-24

Type of Report: (Check one)

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

Dianna L Biancheria
Candidate Full Name (if applicable)

School Committee DIST C
Office Sought and District

8 Ventura Rd
Residential Address

E-mail: dbiancheria@charter.net

Phone #: 5088684212

CTE Dianna L Biancheria
Committee Name

Stephanie Watson
Name of Committee Treasurer

8 Ventura Rd
Committee Mailing Address

E-mail: dbiancheria@charter.net

Phone #: 5088684212

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>4676.34</u>
Line 2: Total receipts this period (page 3, line 12)	<u>100.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>4776.34</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>4627.34</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>149-</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>0</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>0</u>
Line 9: Name of bank(s) used:	<u>Berkshire Bank Main St Worcester</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: Stephanie Watson (Treasurer's signature) Date: _____

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with 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 that are not otherwise disclosed in this report.

Candidate without 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, 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 candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: _____

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule E Liabilities.

Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
11-1-23	Paul G. 10 Agno 11 Monardnock Rd Worce 01609	100-	_____
		100	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)

Line 10: Total Receipts over \$50 (or listed above)	100-	<p><i>* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.</i></p>
Line 11: Total Receipts \$50 and under (not listed above)	0	
Line 12: TOTAL RECEIPTS IN THE PERIOD	100-	

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires for each expenditure over \$50 that the candidate or committee list the name and address, in alphabetical order, to whom each expenditure is paid in a reporting period. Expenditures of \$50 and less can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all expenditures made of any amount. Do not include out-of-pocket expenditures of candidate reported on Schedule D. Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
11/30	Berkshire Bank PO BOX 1308	1308 PO Box Fittsfield	fee	9.95
12/31	Berkshire Bank	PO BOX 1308 Fittsfield	fee	9.95
12-11	Boys + Girls Club	Club Way Worce	Donation	100-
11-30	St Bernards Church	228 Lincoln St Worce	Donation	150-
10-19	St John Church	44 Temple St Worce	Donation	100-
11-1	Staples	571 Boston Turnpike Shrewsbury Mass	CARDS	296.41
11-1	staples	571 Boston Turnpike Shrewsbury	PRINTS	31.44
10-31	staples	571 Boston Turnpike Shrewsbury	CARDS	49.56
11-2	RUMBLE UP	Washington DC	PHONE/TEX	571.-
11-2	Tiger Press	PO Box 215 Longmeadow	Postage/CARDS	3137.43
11-2	US Postal Service	43 Maple Ave Shrewsbury	Stamps	171.60

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

** If you have itemized expenditures of \$50 and under, include them in line 13. Line 14 should include only those expenditures not itemized above.*

Enter on page 1, line 4 →

Line 13: Expenditures over \$50 (or listed above)	4627.34
Line 14: Expenditures \$50 and under (not listed above)	0
Line 15: TOTAL EXPENDITURES IN THE PERIOD	4627.34

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

M.G.L. c. 55 requires the name and residential address be reported for all in-kind contributions from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor of \$50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. Do not include out-of-pocket expenditures of candidate reported on Schedule D. *Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.*

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value

** If you have itemized in-kind contributions of \$50 and under, include them in line 16. Line 17 should include only those expenditures not itemized above.*

Enter on page 1, line 6 →

Line 16: In-Kind Contributions over \$50 (or listed above)	
Line 17: In-Kind Contributions \$50 and under (not listed above)	
Line 18: TOTAL IN-KIND CONTRIBUTIONS IN THE PERIOD	

SCHEDULE E: CANDIDATE OUT-OF-POCKET EXPENSES

Out-of-pocket expenses are expenditures on behalf of a candidate or candidate's committee made directly to a vendor using a candidate's personal funds. The information entered on Schedule E is not also entered on Schedule A or Schedule B. Direct monetary contributions from a candidate, which are deposited into the committee bank account, are receipts that should be listed in Schedule A. If a candidate intends an out-of-pocket expense to be a loan, enter the information on this schedule and on Schedule D: Liabilities. *Attach additional pages as needed to report all expenditures. Please include the candidate or committee name and a page number on each additional page.*

Date Paid	Name and Address of Vendor (alphabetical listing required)	Amount	Purpose of Expenditure
Line 20: Total Itemized Out-Of-Pocket Expenditures Over \$50 (or listed above)			<p style="text-align: center;"><i>* If you have out-of-pocket expenses of \$50 and under, include them in line 20. Line 21 should include only those expenditures not itemized above.</i></p> <p>← Enter on page 1, line 8</p>
Line 21: Total Unitemized Out-Of-Pocket Expenditures \$50 and under (not listed above)			
Line 22: TOTAL OUT-OF-POCKET EXPENDITURES IN THE PERIOD			

*Schedule E is not for ballot question committee use

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Reporting Period dates: Beginning Date: Jan 1-23 Ending Date: Oct 21-23

Type of Report: (Check one)

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

Diana L. Biancheria
Candidate Full Name (if applicable)

School Committee DISTC
Office Sought and District

8 Ventura Rd
Residential Address

E-mail: dbiancheria@charter.net

Phone # (optional): 5088684212

CTE Diana Biancheria
Committee Name

Stephanie Watson
Name of Committee Treasurer

8 Ventura Rd
Committee Mailing Address

E-mail: dbiancheria@charter.net

Phone # (optional): 5088684212

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	729.39	
Line 2: Total receipts this period (page 3, line 11)	8091.18	2023 OCT 30 PM 4:10
Line 3: Subtotal (line 1 plus line 2)	8820.57	Received Worcester City Clerk
Line 4: Total expenditures this period (page 5, line 14)	4144.23	
Line 5: Ending Balance (line 3 minus line 4)	4676.34	
Line 6: Total in-kind contributions this period (page 6)	0	
Line 7: Total (all) outstanding liabilities (page 7)	575	
Line 8: Name of bank(s) used:	<u>Bensline Bank Manchester</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: Stephanie Watson (Treasurer's signature) Date: 10-30-23

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: 10-30-23

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)
9-12	ABRAHAM, Stephen 285 Main St	100-	
9-21	AZZARONE, GERALD 104 SHEKWSBURY ST	100-	
5-16	BLAIR, TERESA 8 HERITAGE HILL DR RUTLAND	500	CPA BLAIR CONSTRUCTION RUTLAND
5-16	DIAZ, ROBERT 210 PARK AVE	200	SPECIALIZED INVESTIGATIVE SERVICES PARK AVE, OWNER
5-16	DiBenedetto, Gina 531 BURCOAT ST	100 (150)	
5-16	DiGIOENNO, James 25 White DR	100	
5-16	DIRENZO JR, JOHN 27 DAVIS Rd Millbury	250	OWNER DIRENZO TRUCKING 27 DAVIS DR MILLBURY MA
9-21	Eddy, William 3 Belvidere Rd	100-	
9-12	FALCONE, Danielle 82 ALVARADO AVE	100-	
9-12	FALCONE, JOE 82 ALVARADO AVE	100-	
9-12	M. FIORE 24 AMANOLA AVE	100.-	
9-12	FISHER, Ed PO BOX 20039	150-	
Line 9: Total Receipts over \$50 (or listed above)		1950	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		pg 1 of 4	← 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)
5-16	LaConte, GEORGE 276 Plantation St	75	
5-16	Lanava, Michael 877 GROVE ST	150	
5-16	MARKARIAN, RICHARD 4 DEAN ST	200	RETIRED
5-16	MAZZONE, ROBERT 18 ARBORWOOD DR	150	
5-16	Melick, JAY 3 E. Mt. St.	200	owner Bennies Cafe EMT/ST
5-16	Melkonian, DAVID 30 Blackthorn DR	250	CARSALES REP. MCGOVERN AUTO
7-12	Mercadante, KEVIN 7 DiGregorio DR	500	OWNER MERCADANTE FUNERAL Home Plantation St
7-12	MOORE, MICHAEL 20 BENGTON LANE MILBURY	100	
7-12	MORANO, PETER 414 Plantation St	100	
5-16	MURRAY, Timothy 11 Kimicutt Rd	100	
5-16	Oliveri, Nathalie 13 MAEJORIE ST	100	
5-16	PALEMO, Frank 48 INDEPENDENCE LANE SHREWSBURY	100	
7-12	Pezzalla, Paul Boston	125	
Line 9: Total Receipts over \$50 (or listed above)		2150	
Line 10: Total Receipts \$50 and under* (not listed above)		.	
Line 11: TOTAL RECEIPTS IN THE PERIOD		pg 2 of 4	← 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.

RECEIPTS

5-16	Piccolo, John 12 GOVERNORS ST	111.59	RETIRED FROM OWNER PICCOLO RESTAURANT
9-12	Piccolo, JOHN 12 GOVERNORS ST	129.59	RETIRED FROM OWNER OF Piccolo REST
5-12	PEZZELLA, ROBERT 42 GREENCOURT ST	100.	
5-12	PEZZELLA, DOLORES 42 GREENCOURT ST	200.	RETIRED
9-15	- RICCIARDI, JAMES 14 PUTNAM LANE	100.	
9-17	SANTA MARIA, Patsy JR 5 SHREWSBURY ST	250	OWNER SERVICE STATION 5 SHREWSBURY STREET
5-16	SIMONCINI, MARYJANE 24 DOLLY DR	100	
9-12	SIMONCINI, Kenneth 24 DOLLY DR	100	
5-16	SIMONE, Angela 20 TORONITA ST	100	
9-15	Kate Toomey 50 IDEAL RD	100	
		<hr/> 1291.18	pg 3

RECEIPTS

512 KENNEY, Nancy 500. RETIRED
8 HERITAGE HILL DR
RUTLAND

921 LABORERS DIST. COUNCIL 500. UNION
POLITICAL LEAGUE CP #80479
7 LABORERS WAY
HOPKINTON

921 VOTER ED FUNDS 500. UNION
LOCAL 170 TEAMSTERS
3305 W CUTOFF
WORC

1500.00

Biancheria

TOTAL Receipts

pg 1	1950
pg 2	2150
pg 3	1291.18
pg 4	1500.

TOTAL	6891.18	
	1200,00	- 50 and UNDER

TOTAL	8091.18
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TOTAL Receipts

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
8-31	AFL-CIO	400 WASHINGTON ST AUBURN MA	donation	50
10-4	All AMERICAN flag	370 BOSTON TURNPIKE SHREWSBURY MA	flag	89.23
9-14	Italian HERITAGE	AMANOLA DE WORC MA	donation	75.
9-26	Monopoli	VERDI ST WORC MA	SHIRTS	150.
10-4	Monopoli	VERDI ST WORC MA	SHIRTS	165.
9-15	Seacoast Imprent	2392 SW BOYNTON, Fla	SGNS	770.
10-25	Seacoast Imprent	2392 SW BOYNTON, Fla	SGNS	650.
10-27	Speak Easy	1902 Van Ness SAN FRANCISCO CA	Ad	1275.
10-26	Tiger Press	PB BOX 215 LONGMEADOW MA	PRINT	920

Line 12: Total Expenditures over \$50 (or listed above) 4144.23

Line 13: Total Expenditures \$50 and under* (not listed above) 0

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD 4144.23

* 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
11-21-22	Falcone	AlVARDO AVE WOOD	TRUCK	300
10-21	MOLIVERI	DEMARCO TERRACE	COMPUTER TRACKING	275
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				575

* 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. Page 6