



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

1/1/2020

Ending Date:

12/31/2020

Type of Report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☐ 30 day after election

☒ year-end report

☐ dissolution

Brian Roger Charville

Candidate Full Name (if applicable)

Lynnfield Planning Board

Office Sought and District

9 Willard Lane, Lynnfield

Residential Address

E-mail: bcharville@gmail.com

Phone # (optional):

The Charville Committee

Committee Name

Gerard A. Noumi

Name of Committee Treasurer

9 Willard Lane, Lynnfield, MA, 01940

Committee Mailing Address

E-mail: gerardnoumi@yahoo.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

0

Line 4: Total expenditures this period (page 5, line 14)

0

Line 5: Ending Balance (line 3 minus line 4)

0

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: N/A

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:

Brian R. Charville (Treasurer's signature)

Date:

1/16/2021

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:

Brian R. Charville (Candidate's signature)

Date:

1/16/2021

Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

1/1/20

Ending Date:

6/23/20

Type of Report: (Check one)

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

Kimberlee Kossover Hansen

Candidate Full Name (if applicable)

School Committee, Lynnfield MA

Office Sought and District

19 Edgemere Rd, Lynnfield MA 01940

Residential Address

Telephone Number (optional):

The Committee to Elect Kimberlee
Kossover Hansen Committee Name for Lynnfield School
Committee

Nicole DiVirgilio

Name of Committee Treasurer

3 Sevinor Rd Lynnfield MA

Committee Mailing Address

Telephone Number (optional):

nicoledivirgilio@gmail.com

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

81.26

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

81.26

Line 4: Total expenditures this period (page 5, line 14)

81.26

Line 5: Ending Balance (line 3 minus line 4)

0

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:

Wakefield Co-operative 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:

Nicole DiVirgilio

(Treasurer's signature)

Date:

6/23/20

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:

Kimberlee Kossover Hansen

(Candidate's signature)

Date:

7/22/20



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: 2020 JUL 22 - 2020 JUL 23 Beginning Date: 1/1/20

Ending Date: 6/23/20

Type of Report: (Check one)

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

Kimberlee Kossover Hansen

Candidate Full Name (if applicable)

School Committee, Lynnfield MA

Office Sought and District

19 Edgemere Rd, Lynnfield MA 01940

Residential Address

Telephone Number (optional):

The Committee to Elect Kimberlee Kossover Hansen Committee Name for Lynnfield School Committee

Nicole DiVirgilio

Name of Committee Treasurer

3 Sevinor Rd Lynnfield MA

Committee Mailing Address

Telephone Number (optional): nicoledivirgilio@gmail.com

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

81.26

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

81.26

Line 4: Total expenditures this period (page 5, line 14)

81.26

Line 5: Ending Balance (line 3 minus line 4)

0

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:

Wakefield Co-operative 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:

Nicole DiVirgilio

(Treasurer's signature)

Date: 6/23/20

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:

(Candidate's signature)

Date:

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.

[illegible]

81.26

0

81.26

Page 4



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Jan. 1, 2020 Ending Date: Dec. 31, 2020

Type of Report: (Check one)

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

Joseph A. Markey

Candidate Full Name (if applicable)

Town Moderator

Office Sought and District

22 Pine St., Lynnfield, MA 01940

Residential Address

E-mail: jomarkey@verizon.net

Phone # (optional):

Joseph Markey Committee

Committee Name

Josephine M. Markey

Name of Committee Treasurer

22 Pine St., Lynnfield, MA 01940

Committee Mailing Address

E-mail: jomarkey@verizon.net

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

289.58

Line 2: Total receipts this period (page 3, line 11)

440.12

Line 3: Subtotal (line 1 plus line 2)

729.70

Line 4: Total expenditures this period (page 5, line 14)

628.40

Line 5: Ending Balance (line 3 minus line 4)

101.30

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: The Savings 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:

Josephine M. Markey (Treasurer's signature)

Date: 12/28/20

OR 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: 12/28/20

3

(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.)

ne 9: Total Receipts over \$50 (or listed above)	440.12
ne 10: Total Receipts \$50 and under* (not listed above)	0
ne 11: TOTAL RECEIPTS IN THE PERIOD	440.12

Page 2

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
5/8/20	Hung Goon	83 Antwerp St. Brighton, MA 02135	PPE masks for Town	478.40
1/6/20	Think of Michael Foundation	P.O. Box 1333 Lynnfield, MA 01940	Tickets for Charity Fund-raiser	150.00
		Line 12: Total Expenditures over \$50 (or listed above)		628.40
		Line 13: Total Expenditures \$50 and under* (not listed above)		
Enter on page 1, line 4 →		Line 14: TOTAL EXPENDITURES IN THE PERIOD		628.40

If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: 2021 JAN 21 P 2:25 Beginning Date: 1/1/2020 Ending Date: 12/31/2020

Type of Report: (Check one)

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

RICHARD J MAZZOLA

Candidate Full Name (if applicable)

LYNNFIELD LIBRARY'S BOARD OF TRUSTEES

Office Sought and District

14 SYLVAN CIRCLE

Residential Address

E-mail: RICHM@FUTURESEARCHLLC.COM

Phone # (optional): 781-258-6544

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

N/A

Line 2: Total receipts this period (page 3, line 11)

Line 3: Subtotal (line 1 plus line 2)

Line 4: Total expenditures this period (page 5, line 14)

Line 5: Ending Balance (line 3 minus line 4)

0

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:

N/A

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

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

(Candidate's signature)

Date: 1/16/2021



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

File with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: JANUARY 1, 2020 Ending Date: DECEMBER 31, 2020

Type of Report: (Check one)

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

PHILIP J. McQUEEN
Candidate Full Name (if applicable)
SCHOOL COMMITTEE, LYNNFIELD, MA
Office Sought and District
ONE FORD AVENUE, LYNNFIELD, MA 01940
Residential Address
E-mail: FLMCR@aol.com
Phone # (optional): (781) 334-0028

COMMITTEE TO ELECT PHILIP McQUEEN
Committee Name
ROBERT F. CONLON
Name of Committee Treasurer
ONE FORD AVENUE, LYNNFIELD 01940
Committee Mailing Address
E-mail: RFCBOSO@aol.com
Phone # (optional): (781) 215-6914

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report 1,698.58
Line 2: Total receipts this period (page 3, line 11) 0
Line 3: Subtotal (line 1 plus line 2) 1,698.58
Line 4: Total expenditures this period (page 5, line 14) 0
Line 5: Ending Balance (line 3 minus line 4) 1,698.58
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: EASTERN 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: Robert F. Conlon (Treasurer's signature)

Date: January 12, 2021

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: Philip J. McQueen (Candidate's signature)

Date: 01/12/21



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

FINAL

RECEIVED

2021 JAN -6 P 1:08

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date: 1-1-20

Ending Date: 12-31-20

Type of Report: (Check one)

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

THOMAS TERRANOVA

Candidate Full Name (if applicable)

Office Sought and District

37 APPLE HILL LANE, LYNNFIELD MA 01940

Residential Address

E-mail: NONE

Phone # (optional):

COMMITTEE TO ELECT TOM TERRANOVA

Committee Name

JOHN F SPADAFORA JR

Name of Committee Treasurer

37 APPLE HILL LANE, LYNNFIELD, MA 01940

Committee Mailing Address

E-mail: NONE

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	1,050
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	1,050
Line 4: Total expenditures this period (page 5, line 14)	1,050
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	5,345.77
Line 8: Name of bank(s) used: BROOKLINE 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:

(Treasurer's signature)

Date: 12/31/2020

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:

(Candidate's signature)

Date: 1/5/2021

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.)

[illegible]

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

0 ← 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)[illegible]

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

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.

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 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE B: EXPENDITURES (continued)[illegible]

* 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.

[illegible]

* 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
5-2-13	TERRANOVA, THOMAS	37 APPLE HILL LANE LYNNFIELD, MA 01940	LOAN	638
5-6-16	TERRANOVA, THOMAS	37 APPLE HILL LANE LYNNFIELD, MA 01940	LOAN	312.5
4-30-13	TERRANOVA, THOMAS	37 APPLE HILL LANE LYNNFIELD, MA 01940	LOAN	276
8-2-12	TERRANOVA, THOMAS	37 APPLE HILL LANE LYNNFIELD, MA 01940	LOAN	4,096.27
8-8-12	TERRANOVA, THOMAS	37 APPLE HILL LANE LYNNFIELD, MA 01940	LOAN	23
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	5,345.77



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

File with: City/Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1-1-19 Ending Date: 12-31-19

Type of Report: (Check one)

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

THOMAS TERRANOVA

Candidate Full Name (if applicable)

Office Sought and District

37 APPLE HILL LANE, LYNNFIELD MA 01940

Residential Address

E-mail: NONE

Phone # (optional):

COMMITTEE TO ELECT TOM TERRANOVA

Committee Name

JOHN F SPADAFORA JR

Name of Committee Treasurer

37 APPLE HILL LANE, LYNNFIELD, MA 01940

Committee Mailing Address

E-mail: NONE

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	1,050
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	1,050
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	1,050
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	5,345.77
Line 8: Name of bank(s) used: BROOKLINE 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:

(Treasurer's signature)

Date: 1/2/2020

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:

(Candidate's signature)

Date: 1/9/2020

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)
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		0 ← 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		0 ← 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.)

[illegible]

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

Line 13: Total 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 B: EXPENDITURES (continued)[illegible]

* 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
5-2-13	TERRANOVA, THOMAS	37 APPLE HILL LANE LYNNFIELD, MA 01940	LOAN	638
5-6-16	TERRANOVA, THOMAS	37 APPLE HILL LANE LYNNFIELD, MA 01940	LOAN	312.5
4-30-13	TERRANOVA, THOMAS	37 APPLE HILL LANE LYNNFIELD, MA 01940	LOAN	276
8-2-12	TERRANOVA, THOMAS	37 APPLE HILL LANE LYNNFIELD, MA 01940	LOAN	4,096.27
8-8-12	TERRANOVA, THOMAS	37 APPLE HILL LANE LYNNFIELD, MA 01940	LOAN	23
Enter on page 1, line 7 →		Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)		5,345.77



Commonwealth
of Massachusetts

Form CPF 102 BQ: Campaign Finance Report
Ballot Question Committee
Office of Campaign and Political Finance

RECEIVED

File with: Director

Office of Campaign and Political Finance
One Ashburton Place
Boston, MA 02108
(617) 727-8352

CPF 102 JAN -6 P 1:23

Please print or type all information, except signatures.

TOWN CLERKS OFFICE
LYNNFIELD, MA

Fill in dates:

Reporting Period Beginning: Month 4 Date 1 Year 2019 Ending: Month 12 Date 31 Year 2019

Type of report: (Check one)

☐ Initial Report ☐ 60th day preceding election ☐ 5th and 20th day of month until election ☐ 5th day of month after election if liabilities exist ☒ Year end ☐ Dissolution

Citizens of Lynnfield Against the Rail Trail
Committee Name

Jim Jorgensen
Name of Committee Treasurer

3 Meservey Ln
Committee Mailing Address

Lynnfield MA 01940
City State & Zip Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 1853.45
Line 2: Total receipts this period (page 2, line 11) \$ 2032.00
Line 3: Subtotal (line 1 plus line 2) \$ 3885.45
Line 4: Total expenditures this period (page 3, line 14) \$ 3559.70
Line 5: Ending balance (line 3 minus line 4) \$ 325.75

Line 6: Total in-kind contributions this period (page 4) \$ 0
Line 7: Total (all) outstanding liabilities (page 4) \$ 0
Line 8: Name of bank(s) used The Savings 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:

Treasurer's signature (in ink)

Date

Jim Jorgensen

1/4/2020

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, CPF ID# 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)
4/1/19	William Bouras 10 Westover Dr, Lynnfield MA	250	00	Retired
4/2/19	Wendy Giunta 7 Westover Dr, Lynnfield MA	382	00	Homemaker
9/13/19	Damian Meola 3 Currie Cir, Lynnfield MA	1000	00	Retired
4/1/19	Frank Serio 25 Westover Dr, Lynnfield MA	100	00	
3/30/19	Steven Vaccaro 6 Wildwood Dr, Lynnfield MA	100	00	
Line 9: Total receipts in excess of \$50 (or listed above)		1532	00	
Line 10: Total receipts \$50 and under* (not listed above)		200	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		2032	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 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
9/17/19	Choice Graphics, Inc	140 Central St. Roxley MA 01969	Postcards	219.55
9/30/19	Choice Graphics Inc	140 Central St Roxley MA 01969	Flyers	239.65
4/4/19	Essex Media Group	110 Munroe St Lynn MA 01903	Advertisement	4738.00
9/28/19	Essex Media Group	110 Munroe St. Lynn MA 01903	Advertisement	562.50
4/1/19	Gilfrida Giugliano	1 Giugliano Ter Lynnfield 01940	Signs	420.00
9/20/19	Lynnfield Villager	26 Albion St. Worcester 01880	Advertisement	400.00
4/4/19	Worcester Item (Lynnfield Villager)	26 Albion St. Worcester 01880	Advertisement	500.00
Line 12: Total Expenditures over \$50 (or listed above)				3559.70
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				3559.70

* 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 6 on page 1.

[illegible]

* 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)		



Office of Campaign and Political Finance

1/1/2019

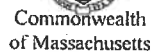
(MM/DD/YYYY)

12/31/2019

(MM/DD/YYYY)

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]



Office of Campaign and Political Finance

RECEIVED

City or Town of: LYNNFIELD

Please print or type all information, except signatures.

Reporting Period: Beginning: 06/13/2020 (MM/DD/YYYY)

Ending: 12/31/2020 (MM/DD/YYYY)

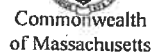
Type of Report: (Check One)

☐ 8th day preceding preliminary/primary ☐ 8th day preceding election ☐ 30th day following election (town or special) ☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
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[illegible]



Office of Campaign and Political Finance

10

RECEIVED

City or Town of: LYNNFIELD

Please print or type all information, except signatures.

Reporting Period: Beginning: 06/13/2020 (MM/DD/YYYY)

Ending: 12/31/2020 (MM/DD/YYYY)

Type of Report: (Check One)

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[illegible]



Office of Campaign and Political Finance

2021 JAN 28 A 11: 31

Ending: 12/31/2020 (MM/DD/YYYY)

☐ 8th day preceding preliminary/primary ☐ 8th day preceding election ☐ 30th day following election (town or special) ☒ 20th day of January (Year-End report)

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[illegible]



Form CPF M 102-0: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

City or Town of: LYNNFIELD

Please print or type all information, except signatures.

Reporting Period: Beginning: 06/13/2020
(MM/DD/YYYY)

Ending: 12/31/2020 (MM/DD/YYYY)

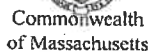
Type of Report: (Check One)

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[illegible]



Form CPF M 102-0: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

City or Town of: LYNNFIELD

Please print or type all information, except signatures.

Reporting Period:	Beginning:	06/13/2020
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(MM/DD/YYYY)

Ending: 12/31/2020

(MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary☐ 8th day preceding election☐ 30th day following election (town or special)☒ 20th day of January (Year-End report)

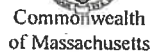
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[illegible]



Form CPF M 102-0: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

City or Town of: LYNNFIELD

Reporting Period: Beginning: 06/13/2020
(MM/DD/YYYY)

Ending: 12/31/2020 (MM/DD/YYYY)

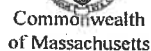
Type of Report: (Check One)

☐ 8th day preceding preliminary/primary ☐ 8th day preceding election ☐ 30th day following election (town or special) ☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

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3. I certify that I do not have a political committee.

[illegible]



Office of Campaign and Political Finance

2021 JAN 21 P 2:38

Please print or type all information, except signatures.

Ending: 12/31/2020
(MM/DD/YYYY)

DD/YYYY) OFFICE
LYNNFIELD, MA

☒ 20th day of January (Year-End report)

1. I certify that I am a candidate for or currently hold Municipal Office.

2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.

3. I certify that I do not have a political committee.

[illegible]



Commonwealth
of Massachusetts

Form CPF M 102-0: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

RECEIVED

City or Town of: LYNNFIELD

Please print or type all information, except signatures.

2021 JAN 29 AM: 14

Reporting Period: Beginning: 06/13/2020
(MM/DD/YYYY)

Ending: 12/31/2020 (MM/DD/YYYY)

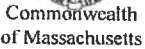
Type of Report: (Check One)

☐ 8th day preceding preliminary/primary ☐ 8th day preceding election ☐ 30th day following election (town or special) ☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

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3. I certify that I do not have a political committee.

[illegible]



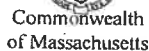
Office of Campaign and Political Finance

Please print or type all information, except signatures.

TOWN CLERK'S OFFICE
(MM/DD/YYYY) WILMINGTON, MA

3. I certify that I do not have a political committee.

[illegible]



Office of Campaign and Political Finance

City or Town of: LYNNFIELD

Please print or type all information, except signatures.

Reporting Period:	Beginning:	06/13/2020
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Ending: 12/31/2020

(MM/DD/YYYY)

(MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary☐ 8th day preceding election☐ 30th day following election (town or special)☒ 20th day of January (Year-End report)

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[illegible]

