



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

Office of Campaign and Political Finance

Please print or type all information, except signatures.

City or Town of: Lynnfield

Reporting Period: Beginning: 4/6/2021

Ending: 5/13/2021

(MM/DD/YYYY)

MM/DD/YYYY

Type of Report: (Check One)

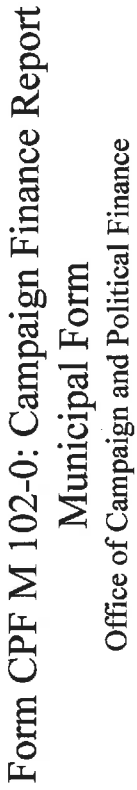
☐ 8th day preceding preliminary/primary☐ 8th day preceding election☒ 30th day following election (town or special)

[] 20th day of January (Year-End report)

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, or incurred any expenditures, 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]



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City or Town of: Lynnfield

Reporting Period: Beginning: 01/01/2021

Ending: 12/31/2021

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

[illegible]



Commonwealth
of Massachusetts

File with: Director
Office of Campaign and Political Finance
One Ashburton Place, Room 411
Boston, MA 02108

CPF ID #: _____

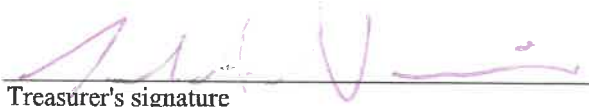
**Form CPF 101 P: Change of Purpose
Candidate's Political Committee
Office of Campaign and Political Finance**

(617) 979-8300
(800) 462-OCPF
ocpf@cpf.state.ma.us
<http://www.mass.gov/ocpf>


1. Name of Candidate: Brian R. Charville
2. Office previously held/sought: Lynnfield Planning Board
3. Office now sought: Lynnfield School Committee
4. Party (if applicable): Democratic
5. Committee: The Charville Committee
Mailing Address: 9 Willard Lane
City / State / Zip: Lynnfield MA 01940
6. Contact Person: Gerard A. Noumi, Treasurer
Mailing Address: 73 Fairview Avenue
City / State / Zip: Lynnfield MA 01940
Email: gerardnoumi@yahoo.com Phone #: 7817107601

In accordance with the requirements of M.G.L. c. 55, I hereby certify that the above-named political committee is now organized for the purpose stated above.

SIGNED UNDER THE PENALTIES OF PERJURY:


Treasurer's signature

Date: 2/5/2021


Candidate's signature

Date: 2/5/2021

RECEIVED
2021 FEB -8 P 12:08
OFFICE
LYNNFIELD, MA



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:

01/01/2021

Ending Date:

04/05/2021

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)

Lynatfield School Committee

Office Sought and District

9 Willard Lane, Lynatfield

Residential Address

E-mail: bcharville@gmail.com

Phone # (optional):

The Charville Committee

Committee Name

Gerard A. Noumi

Name of Committee Treasurer

9 Willard Lane, Lynatfield

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)

5,075.00

Line 3: Subtotal (line 1 plus line 2)

5,075.00

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

3,025.46

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

2,049.54

Line 6: Total in-kind contributions this period (page 6)

2,884.50

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used: Wakefield Cooperative 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:

Gerard A. Noumi

(Treasurer's signature)

Date: 04/04/2021

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: 04/05/2021

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.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/3/21	Bill Brady 165 Woburn St., Needham, MA	100	
3/15/21	Chris Cavallo 10 BBhops Ln., Lynnfield	100	
3/31/21	Ed Champy 4 Pagos Way, Lynnfield	250	Developer, Waypoint Companies
2/8/21	Brett Charville 8 Spanish Moss, Irvine, CA	500	President, PC&S
3/22/21	Brian Charville 9 Willard Ln., Lynnfield	200	Attorney, Fines Development Group
2/5/21	Eugene Charville 7436 Haywood Oaks Dr., Raleigh, N.C.	1,000	Regional Sales Officer, AgriFinancial Services
2/25/21	Gene Covino 14 Trickett Rd., Lynnfield	100	
2/10/21	Cathleen Dwyer Pleasant St., #408, Arlington, MA	100	
4/3/21	Kristen Elworthy 1 Bryant St., Lynnfield	150	
2/19/21	Bill Fallon 12 Teaberry Ln., Andover, MA	250	Retired
2/25/21	Brian E. Fallon Sr. 2 Landmark Dr., Methuen	100	
3/6/21	Brian E. Fallon, Jr. 3905 N. Upland St., Arlington, VA	75	
Line 9: Total Receipts over \$50 (or listed above)		2,925	this page
Line 10: Total Receipts \$50 and under* (not listed above)		150	
Line 11: TOTAL RECEIPTS IN THE PERIOD		(over)	

← 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)
2/21/21	Joe Gallagher 71 Phillips Rd., Lynnfield	100	
2/24/21	Dave Geary 16 Candlewood Rd., Lynnfield	100	
3/15/21	James Healey 17 Pine Hill Rd., Lynnfield	200	SVP, Eastern Bank
2/8/21	Charlie Lyons 16 Sumner Way, Methuen, MA	200	Consultant, Lyons Consulting
2/24/21	Sabrina Macdell 1 Ashdale Rd., Lynnfield	100	
3/23/21	Michael McFlynn 1 Manuola Way, Medford, MA	200	Consultant, Michael J. McFlynn LLC
3/2/21	Nancy McManus 76 Canterbury Rd., Lynnfield	100	
4/1/21	Beverly Morrish 4 Glen Dr., Lynnfield	200	Retired
2/27/21	Gerard Nouri 73 Fairview Ave., Lynnfield	200	Director Relationship Mgmt Cartera Commerce
3/5/21	Low Truonzo 43 Gony Lane, Lynnfield	250	Physician, North Shore Neurology
2/3/21	Steve Walsh 2 Mayberry Ln., Lynnfield	250	President & CEO, MA Health & Hospital Association
3/5/21	Charlie Wills 7 Smith Farm Trail, Lynnfield	100	
Line 9: Total Receipts over \$50 (or listed above)		2,000	this page
Line 10: Total Receipts \$50 and under* (not listed above)		—	
Line 11: TOTAL RECEIPTS IN THE PERIOD		5,075	← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
3/3/21	Connolly Printing	17B Gill St. Woburn, MA 01801	Yard signs & frames	1,184.69
3/31/21	Connolly Printing	17B Gill St. Woburn, MA 01801	Dear Friend postcards	244.38
3/18/21	Essex Media Group	110 Monroe St. Lynn, MA 01901	Newspaper ad	270
3/22/21	Essex Media Group	110 Monroe St. Lynn, MA 01901	Newspaper ad	270
3/29/21	Essex Media Group	110 Monroe St. Lynn, MA 01901	Newspaper ad	270
3/22/21	Great Oak Publications	26 Albion St. Wakefield, MA 01880	Newspaper ad	362.25
3/29/21	Great Oak Publications	26 Albion St. Wakefield, MA 01880	Newspaper ad	362.25
Line 12: Total Expenditures over \$50 (or listed above)				2,963.57
Line 13: Total Expenditures \$50 and under* (not listed above)				61.89
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				3,025.46

* 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
3/1/21	Brian Charville Attorney, Ferris Dev. Group	9 Willard Ln. Lynfield	Newspaper ad	420
3/4/21	Brian Charville Attorney, Ferris Dev. Group	9 Willard Ln. Lynfield	Newspaper ad	270
3/8/21	Brian Charville Attorney, Ferris Dev. Group	9 Willard Lane Lynfield	Newspaper ad	362.25
3/11/21	Brian Charville Attorney, Ferris Dev. Group	9 Willard Ln. Lynfield	Newspaper ad	270
3/15/21	Brian Charville Attorney, Ferris Dev. Group	9 Willard Ln. Lynfield	Newspaper ad	362.25
2/5/21 - 4/5/21	Sarah Handler Kelley Marketing Consultant, self-employed	2 Davenport Court Lynfield	Digital media consulting	1,000
2/28/21	Sarah Handler Kelley Marketing consultant, self-employed	2 Davenport Court Lynfield	Photographs	200

Line 15: In-Kind Contributions over \$50 (or listed above) 2,884.50

Line 16: In-Kind Contributions \$50 & under (not listed above) 0

Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS 2,884.50

* 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.

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.

Enter on page 1, line 7 →

Page 7



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

File 2021 MAY 13 PM 2:38 for Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date: 4/6/2021

Ending Date: 5/13/2021

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)

Lynfield School Committee

Office Sought and District

9 Willard Lane, Lynfield

Residential Address

E-mail: bcharville@gmail.com

Phone # (optional):

The Charville Committee

Committee Name

Gerard A. Nouni

Name of Committee Treasurer

9 Willard Lane, Lynfield

Committee Mailing Address

E-mail: gerardnouni@yahoo.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

2,049.54

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

500.00 cash + loan

Line 3: Subtotal (line 1 plus line 2)

2,549.54

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

2,842.01

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

\$0.89 in the bank

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 Cooperative

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: 5/13/21

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: 5/13/21

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)

100

Line 10: Total Receipts \$50 and under* (not listed above)

①

Line 11: TOTAL RECEIPTS IN THE PERIOD

100

← 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]

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4/7/21	Great Oak Publications (Villagers)	26 Albion St. Wakefield, MA 01880	Newspaper ad	362.25
4/14/21	State - Line Graphic	6 Victoria St. Everett, MA 02149	Print matter	2,079.76
5/7/21	Brian Charville	9 Willard Ln. Lyonsfield	Loan repayment	400.00
			Line 12: Total Expenditures over \$50 (or listed above)	2,842.01
			Line 13: Total Expenditures \$50 and under* (not listed above)	0
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	2,842.01

* 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.

[illegible]

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

Page 7



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: 05/14/2021 Ending Date: 12/31/2021

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 School Committee 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 Committee Mailing Address E-mail: gerardnoumi@yahoo.com Phone # (optional):
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SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$0.89
Line 2: Total receipts this period (page 3, line 11)	\$0.00
Line 3: Subtotal (line 1 plus line 2)	\$0.00
Line 4: Total expenditures this period (page 5, line 14)	\$0.89
Line 5: Ending Balance (line 3 minus line 4)	\$0.00
Line 6: Total in-kind contributions this period (page 6)	\$0.00
Line 7: Total (all) outstanding liabilities (page 7)	\$0.00
Line 8: Name of bank(s) used:	Wakefield Cooperative 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: [Signature] (Treasurer's signature) Date: 1/13/2022

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: 1/13/22

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]

* 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]

Line 9: Total Receipts over \$50 (or listed above)

0

Line 10: Total Receipts \$50 and under* (not listed above)

0

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]

* 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)	0
			Line 16: In-Kind Contributions \$50 & under (not listed above)	0
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
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	0



Commonwealth
of Massachusetts

Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE MUNICIPAL FORM

Office of Campaign and Political Finance

File with: City / Town Clerk or Election Commission

2021 MAR 30 P 1:05

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

CANDIDATE:	Full Name:	JOSEPH R. CONNELL		
	Residential Address:	3 STONE LANE		
	City / State / Zip:	LYNNFIELD MA 01940		
	E-Mail Address:	j-kconnell@comcast.net	Phone #:	617-388-4781
	Party Affiliation:			
(If applicable)				
OFFICE SOUGHT/PURPOSE:				
Title:		SELECT BOARD, LYNNFIELD MA 01940		
District:				

COMMITTEE:	Name of Committee:	NO COMMITTEE FORMED		
	(The name of the committee must include the candidate's last name)			
	Committee Mailing Address:			
	City / State / Zip:		Phone #:	

OFFICERS:

Chairman:	Treasurer*:
Residential Address:	Residential Address:
City / State / Zip:	City / State / Zip:
Phone #:	Phone #: Email:
*A public employee may not serve as treasurer of any political committee (see reverse).	
Other Officer/Title:	Other Officer/Title:
Residential Address:	Residential Address:
City / State / Zip:	City / State / Zip:
Phone #:	Phone #:

(Complete and attach a Form CPF M A 101, if necessary, with other officers and finance committee, if any.)

I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

Candidate's signature

Date: 3/29/2021

I hereby accept the office of Treasurer of the above-named committee. I affirm that I am not a public employee as defined by M.G.L. c. 55, s. 13. I understand that: 1) I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election; 2) if after my acceptance of this office I become an appointed public employee, I must resign this position and notify OCPF of my resignation; and 3) a candidate may not serve as treasurer of the political committee organized on his/her behalf.

SIGNED UNDER THE PENALTIES OF PERJURY:

Treasurer's signature

Date:

I hereby accept the office of Chairman of the above-named committee.

SIGNED UNDER THE PENALTIES OF PERJURY:

Chairman's signature

Date:



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: 4/6/2021 Ending Date: 2021 MAY 5 P 2:20

Type of Report: (Check one)

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

TOWN CLERKS OFFICE
LYNNFIELD, MA

JOSEPH R. CONNELL

Candidate Full Name (if applicable)

SELECT BOARD

Office Sought and District

3 STONE LANE, LYNNFIELD

Residential Address

E-mail: JRCONNELL@COMCAST.NET

Phone # (optional):

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

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:

[Signature] (Treasurer's signature)

Date: 5/5/21

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: 5/5/21

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]

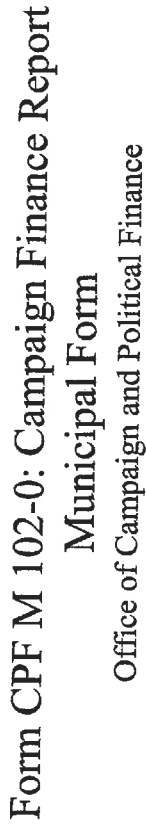
Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

← 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.



LYNNFIELD

City or Town of:

Please print or type all information, except signatures

Reporting Period:

Beginning: 4/6/2021

Ending: 5/13/2021

2021 MAY - 5 P 2:20

(MM/DD/YYYY)

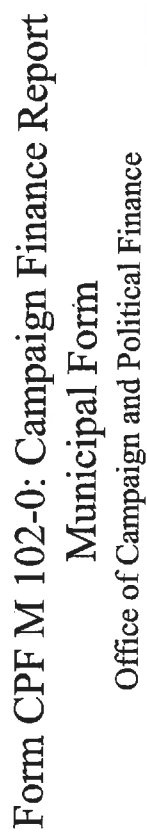
Type of Report: (Check One)

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

[illegible]



City or Town of: <u>Lynnfield</u>	
Reporting Period: <u>Beginning: 1/1/2021</u>	Ending: <u>12/31/2021</u>
	(MM/DD/YYYY)
<div> <div>2022 JAN -5 A 9 39</div> <div>(MM/DD/YYYY) E</div> </div>	

Type of Report: (Check One)

<input type="checkbox"/> 8th day preceding preliminary/primary	<input type="checkbox"/> 8th day preceding election	<input type="checkbox"/> 30th day following election (town or special)	<input checked="" type="checkbox"/> 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.
3. I certify that I do not have a political committee.

[illegible]

Commonwealth
of Massachusetts

Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE MUNICIPAL FORM

Office of Campaign and Political Finance

File with: City / Town Clerk or Election Commission

2021 FEB 24 P 12:55

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

CANDIDATE:	Full Name:	Katharine DePrizio		
	Residential Address:	38 W Huckleberry RD		
	City / State / Zip:	Lynnfield, MA 01940		
	E-Mail Address:	Kate.DePrizio@gmail.com	Phone #:	978-868-8646
	Party Affiliation:			
(If applicable)				
OFFICE SOUGHT/PURPOSE:				
Title: School Committee				
District: Lynnfield				

COMMITTEE:	Name of Committee:	DePrizio Committee		
	(The name of the committee must include the candidate's last name)			
	Committee Mailing Address:	38 W Huckleberry RD		
City / State / Zip:	Lynnfield	MA	01940	Phone #: 617-780-5178

OFFICERS:

Chairman:	Michael DePrizio	Treasurer*:	Michael DePrizio
Residential Address:	38 W Huckleberry RD	Residential Address:	38 W Huckleberry RD
City / State / Zip:	Lynnfield MA 01940	City / State / Zip:	Lynnfield MA 01940
Phone #:	617-780-5178	Phone #:	617-780-5178
		Email:	michael.deprizio@gmail.com
Other Officer/Title:		*A public employee may not serve as treasurer of any political committee (see reverse)	
Residential Address:		Other Officer/Title:	
City / State / Zip:		Residential Address:	
Phone #:		City / State / Zip:	
		Phone #:	

(Complete and attach a Form CPF MA 101, if necessary, with other officers and finance committee, if any.)

I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

K. E. DePrizio
Candidate's signature

Date: 2-15-21

I hereby accept the office of Treasurer of the above-named committee. I affirm that I am not a public employee as defined by M.G.L. c. 55, s. 13. I understand that: 1) I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election; 2) if after my acceptance of this office I become an appointed public employee, I must resign this position and notify OCPF of my resignation; and 3) a candidate may not serve as treasurer of the political committee organized on his/her behalf.

SIGNED UNDER THE PENALTIES OF PERJURY:

Treasurer's signature

Date: 2/16/21

I hereby accept the office of Chairman of the above-named committee.
SIGNED UNDER THE PENALTIES OF PERJURY:

Chairman's signature

Date: 2/16/21



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: 1/1/2021 Ending Date: 2021/4/30

Type of Report: (Check one)

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

Katharine DePrizio

Candidate Full Name (if applicable)

Lynnfield School Committee

Office Sought and District

38 W Huckleberry Rd, Lynnfield, MA 01940

Residential Address

E-mail: kate.deprizio@gmail.com

Phone # (optional):

DePrizio Committee

Committee Name

Michael DePrizio

Name of Committee Treasurer

38 W Huckleberry Rd, Lynnfield, MA 01940

Committee Mailing Address

E-mail: michael.deprizio@gmail.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

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

2502.32

Line 3: Subtotal (line 1 plus line 2)

2502.32

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

2117.97

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

384.35

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

969.53

Line 8: Name of bank(s) used: Eastern Bank, 45 Salem St, Lynnfield, MA

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: 4/5/21

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: 4/5/21

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)
3/1/21	Christine & Louis DePrizio 57 Reynolds Avenue, Chelsea, MA 01940	100	
3/3/21	Michael & Katharine DePrizio 38 W Huckleberry Rd, Lynnfield, MA 01940	969.53	Principal Architect, Akamai Technologies, Inc. Homemaker
3/4/21	Nicholas DePrizio 57 Reynolds Avenue, Chelsea, MA 01940	96.8	
4/3/21	Kristen Elworthy 1 Bryany St, Lynnfield, MA 01940	145.35	
2/20/21	Joe Gallagher 71 Phillips Rd, Lynnfield, MA 01940	100	
2/24/21	Amy Geary 16 Candlewood Rd, Lynnfield, MA 01940	96.8	
3/3/21	Sarah Hudson 674 Lowell St, Lynnfield, MA 01940	100	
2/21/21	Elizabeth Kreplin 26W441 Weisbrook Rd, Wheaton, Illinois 60189	96.8	
3/2/21	Nancy Pecoraro McManus 76 Canterbury Rd, Lynnfield MA 01940	96.8	
3/5/21	Adrienne Miller 5 Elliot Road, Lynnfield, MA 01940	96.8	
2/24/21	Sabrina Fabrizio 1 Ashdale Rd, Lynnfield, MA 01940	96.8	
2/23/21	Lauren Wolf 11 Perkins Lane, Lynnfield, MA 01940	96.8	
Line 9: Total Receipts over \$50 (or listed above)		1122.95	
Line 10: Total Receipts \$50 and under* (not listed above)		409.84	
Line 11: TOTAL RECEIPTS IN THE PERIOD		2502.32	← 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]

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
3/16/21	Connolly Printing	17B Gill Street Woburn, MA 01801	150 Signs & Stakes	969.53
3/16/21	Connolly Printing	17B Gill Street Woburn, MA 01801	Additional 50 signs & stakes	398.44
3/31/21	Essex Media Group	Attn: Ralph Mitchell 33 Bay State Road Lynnfield, MA 01940	Ad - Lynnfield Weekly News	750
Line 12: Total Expenditures over \$50 (or listed above)				2117.97
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				2117.97

* 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
3/3/21	Michael & Katharine DePrizio	38 W Huckleberry Rd Lynnfield, MA 01940	Payment to Connolly Printing for Initial 150 Sign/Stakes	969.53
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				969.53



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: 4/6/2021 Ending Date: 5/13/2021 MAY 13 P 2:01

Type of Report: (Check one)

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

Katharine DePrizio

Candidate Full Name (if applicable)

Lynnfield School Committee

Office Sought and District

38 W Huckleberry Rd, Lynnfield, MA 01940

Residential Address

E-mail: kate.deprizio@gmail.com

Phone # (optional):

DePrizio Committee

Committee Name

Michael DePrizio

Name of Committee Treasurer

38 W Huckleberry Rd, Lynnfield, MA 01940

Committee Mailing Address

E-mail: michael.deprizio@gmail.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

384.35

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

1800.00

Line 3: Subtotal (line 1 plus line 2)

2184.35

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

2097.76

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

86.59

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

969.53

Line 8: Name of bank(s) used: Eastern Bank, 45 Salem St, Lynnfield, MA

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: 5/13/21

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: 5/13/21

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)
4/17/21	Michael & Katharine DePrizio 38 W Huckleberry Rd, Lynnfield, MA 01940	1800	Principal Architect, Akamai Technologies, Inc. Homemaker
Line 9: Total Receipts over \$50 (or listed above)		1800.00	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1800.00	

* 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)
			RECEIVED 2021 MAY 13 P 2:01 TOWN CLERK'S OFFICE LYNNFIELD, MA
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

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

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

[illegible]

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

2079.76

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

0

Line 14: TOTAL EXPENDITURES IN THE PERIOD

2079.76

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 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
			<div style="border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED 2021 MAY 13 P 2:01 TOWN CLERK'S OFFICE LITCHFIELD, CT </div>	
			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
3/3/21	Michael & Katharine DePrizio	38 W Huckleberry Rd Lynnfield, MA 01940	Payment to Connolly Printing for Initial 150 Sign/Stakes 2021 MAY 13 P 2:01	969.53
			TOWN CLERK'S OFFICE LYNNFIELD, MA	
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				969.53



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: 5/14/21

Ending Date: 12/31/21

Type of Report: (Check one)

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

Katharine DePrizio

Candidate Full Name (if applicable)

Lynnfield School Committee

Office Sought and District

38 W Huckleberry Rd, Lynnfield, MA 01940

Residential Address

E-mail: kate.deprizio@gmail.com

Phone # (optional):

DePrizio Committee

Committee Name

Michael DePrizio

Name of Committee Treasurer

38 W Huckleberry Rd, Lynnfield, MA 01940

Committee Mailing Address

E-mail: michael.deprizio@gmail.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

86.59

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)

86.59

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

969.53

Line 8: Name of bank(s) used: Eastern Bank, 45 Salem St, Lynnfield, MA

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: 1/20/22

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: 1/20/22

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.

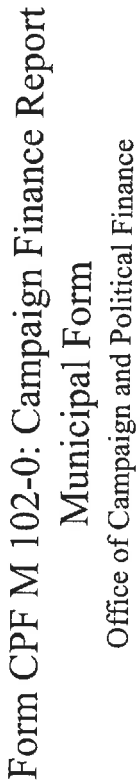
SCHEDULE B: EXPENDITURES (continued)[illegible]

* 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 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
3/3/21	Michael & Katharine DePrizio	38 W Huckleberry Rd Lynnfield, MA 01940	Payment to Connolly Printing for Initial 150 Sign/Stakes	969.53
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				969.53



Reporting Period: Beginning:

(MM/DD/YYYY)

Ending:

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

[illegible]



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

Fill in Reporting Period dates:

2021 APR -5 A 11:38
Beginning Date:

File with: City or Town Clerk or Election Commission

Ending Date: 4/5/21

Type of Report: (Check one)

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

Donald P. Garity
Candidate Full Name (if applicable)

Assessor

Office Sought and District

232 Summer St

Residential Address

E-mail: dpgarity@msn.com

Phone # (optional): 781-775-1321

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

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:	0

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: 4/5/21

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: 4/5/21



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: Ending Date: 2021 JUN 10 A 9 23

Type of Report: (Check one)

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

ANDREW KENNEALLY

Candidate Full Name (if applicable)

LYNNFIELD LIBRARY BOARD OF TRUSTEES

Office Sought and District

8 LOVELL RD. LYNNFIELD, MA 01940

Residential Address

E-mail: ANDY KENNEALLY@GMAIL.COM

Phone # (optional): 617-892-0125

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

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:

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: N/A (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: Andrew Kenneally (Candidate's signature)

Date: 6/10/2021



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

Filed with City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Jan. 1, 2021 Ending Date: May 13, 2021

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	<u>101.30</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>101.30</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>101.30</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>The Savings 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: Josephine M. Markey (Treasurer's signature)

Date: 5/13/21

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: 5/13/21



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

Fill in Reporting Period dates:

Beginning Date:

May 14, 2021

Ending Date:

Dec 21, 2021

File with City or Town Clerk or Election Commission

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

101.30

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

0

Line 3: Subtotal (line 1 plus line 2)

101.30

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

0

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:

12/21/21

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:

Joseph Markey

(Candidate's signature)

Date:

12/21/21



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

2021 APR -1 A 8:25

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date: 1/1/2021

Ending Date: 4/5/2021

Type of Report: (Check one)

☐ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

Amy MacNulty

Candidate Full Name (if applicable)

Lynnfield Planning Board

Office Sought and District

40 Merrow Road, Lynnfield, MA

Residential Address

E-mail: amacnulty@gmail.com

Phone # (optional): 781-405-2298

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

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)

Line 6: Total in-kind contributions this period (page 6)

Line 7: Total (all) outstanding liabilities (page 7)

Line 8: Name of bank(s) used:

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:

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: April 1, 2021



Commonwealth
Massachusetts

Municipal Form

Office of Campaign and Political Finance

File with: **RECEIVED** City or Town Clerk or Election Commission

Period in Reporting Period dates: Beginning Date: 4/6/2021 Ending Date: 5/13/2021

2021 MAY -5 P 12:43

Type of Report: (Check one)

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

TOWN CLERKS OFFICE
LYNNFIELD, MA

Amy MacNulty

Candidate Full Name (if applicable)

Planning Board

Office Sought and District

40 Merrow Road, Lynnfield, MA 01940

Residential Address

E-mail: amacnulty@gmail.com

Phone # (optional): 781-405-2298

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

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)

Line 6: Total in-kind contributions this period (page 6)

Line 7: Total (all) outstanding liabilities (page 7)

Line 8: Name of bank(s) used:

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.

Subscribed under the penalties of perjury: _____ (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.

Subscribed under the penalties of perjury: Amy MacNulty (Candidate's signature)

Date: 5/5/21



Office of Campaign and Political Finance

Please print or type all information, except signatures.

City or Town of: LYNNFIELD

Reporting Period: Beginning: 01/01/2001 Ending: 12/31/2001

Beginning: 01/01/2021 (MM/DD/YYYY) Ending: 12/31/21 (MM/DD/YYYY)

☐ 8th day preceding preliminary/primary ☐ 8th day preceding election ☐ 30th day following election (primary or caucus)

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.

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

[illegible]

HOW TO

2022 JAN 10 P 1:12

CLERKS OFFICE
CHICAGO, ILL.



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 APR -1 P 12:58 Beginning Date: JANUARY 1, 2021 Ending Date: MARCH 31, 2021

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

Residential Address

E-mail: PHILIPJ@GOL.COM

Phone # (optional): (781) 334-0028

COMMITTEE TO ELECT PHILIP McQUEEN

Committee Name

ROBERT F. CONLON

Name of Committee Treasurer

ONE FORD AVENUE, LYNNFIELD, MA

Committee Mailing Address

01904

E-mail: RFCBOS@GOL.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)

842.56

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

856.02

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: April 1, 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: 04/01/21

CONTINUED TO NEXT PAGE (MARCH 30, 2021)

(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.)

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

← Enter on page 1, line 2

Page 3

SCHEDULE B: EXPENDITURES

(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.)

Line 12: Total Expenditures over \$50 (or listed above)	842.56
Line 13: Total Expenditures \$50 and under* (not listed above)	0
Line 14: TOTAL EXPENDITURES IN THE PERIOD	842.56

Page 4

Enter on page 1, line 4 →

Page 5

COMMITTEE TO ELECT PHILIP MCQUEEN (MARCH 31, 2021)
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)	<i>0</i>
			Line 16: In-Kind Contributions \$50 & under (not listed above)	<i>0</i>
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	<i>0</i>

* 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.

[illegible]

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

Page 7



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: APRIL 1, 2021 Ending Date: MAY 3, 2021

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
Residential Address

E-mail: PHILMC@AOL.COM

Phone # (optional): (781) 334-0628

2021 MAY 4 11:48
RECEIVED
TOWN CLERK'S OFFICE
LYNNFIELD, MA

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>856.02</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>856.02</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>856.02</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>EASTERN BANK</u>

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Robert F. Conlin (Treasurer's signature) Date: MAY 3, 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: [Signature] (Candidate's signature) Date: MAY 3, 2021

(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.)

← Enter on page 1, line 2

Page 2

Line 9: Total Receipts over \$50 (or listed above)	<u>0</u>
Line 10: Total Receipts \$50 and under* (not listed above)	<u>0</u>
Line 11: TOTAL RECEIPTS IN THE PERIOD	<u>0</u>

* 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

(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.)

* 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)

Line 14: TOTAL EXPENDITURES IN THE PERIOD

Page 5

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.

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)	



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

2022 JAN -3 A 10:42
Fill in Reporting Period dates:

Beginning Date:

MAY 9, 2021

Ending Date:

DECEMBER 31, 2021

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

Office Sought and District

ONE FORD AVENUE, LYNNFIELD, MA

Residential Address

E-mail:

FILMCA@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, MA

Committee Mailing Address

E-mail:

RFCBOJO@aol.com

Phone # (optional):

(781) 215-6914

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

856.02

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

0

Line 3: Subtotal (line 1 plus line 2)

856.02

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

-

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

856.02

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 1, 2022

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:

Philip J. McQueen

(Candidate's signature)

Date:

01/01/22

(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.)

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

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

(DECEMBER 31, 2021)

(DECEMBER 31, 2021)

* 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 (continued) (DECEMBER 31, 2021)

[illegible]

4

6

①

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

COMMITTEE TO ELECT PHILIP M. QUIGLEY (DECEMBER 31, 2021)

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.

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		

* 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.

[illegible]

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

~~0~~



Commonwealth
of Massachusetts

Form CPF M101: STATEMENT OF ORGANIZATION
CANDIDATE'S COMMITTEE
MUNICIPAL FORM

Office of Campaign and Political Finance

File with: City / Town Clerk or Election Commission

2021 FEB 12 A 11:30

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

CANDIDATE:	Full Name:	E. Page Wilkins		
	Residential Address:	3 Cranberry Lane		
	City / State / Zip:	Lynnfield MA 01940		
	E-Mail Address:	epwilkins@mac.com	Phone #:	617 721 0750
	Party Affiliation:			
OFFICE SOUGHT/PURPOSE:				
Title: Planning Board				
District:				

COMMITTEE:	Name of Committee:	NO committee to be formed		
	(The name of the committee must include the candidate's last name)			
	Committee Mailing Address:			
	City / State / Zip:		Phone #:	
OFFICERS:				
Chairman:		Treasurer*:		
Residential Address:		Residential Address:		
City / State / Zip:		City / State / Zip:		
Phone #:		Phone #: Email:		
Other Officer/Title:		*A public employee may not serve as treasurer of any political committee (see reverse)		
Residential Address:		Other Officer/Title:		
City / State / Zip:		Residential Address:		
Phone #:		City / State / Zip:		
		Phone #:		

(Complete and attach a Form CPF M A 101, if necessary, with other officers and finance committee, if any.)

I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

Candidate's signature

Date: 2/12/21

I hereby accept the office of Treasurer of the above-named committee. I affirm that I am not a public employee as defined by M.G.L. c. 55, s. 13. I understand that: 1) I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election; 2) if after my acceptance of this office I become an appointed public employee, I must resign this position and notify OCPF of my resignation; and 3) a candidate may not serve as treasurer of the political committee organized on his/her behalf.

SIGNED UNDER THE PENALTIES OF PERJURY:

Treasurer's signature

Date:

I hereby accept the office of Chairman of the above-named committee.

SIGNED UNDER THE PENALTIES OF PERJURY:

Chairman's signature

Date:



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date: 1/1/2021

Ending Date: 4/5/2021

Type of Report: (Check one)

☐ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

Elizabeth Page Wilkins

Candidate Full Name (if applicable)

Planning Board

Office Sought and District

3 Cranberry Lane

Residential Address

E-mail: epwilkins@mac.com

Phone # (optional):

N/A

Committee Name

N/A

Name of Committee Treasurer

N/A

Committee Mailing Address

E-mail:

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:

(Treasurer's signature)

Date:

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

Candidate with Committee

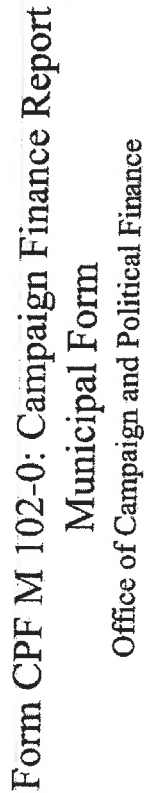
☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities 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. 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.

(Candidate's signature)

Date: 4/5/2021



Please print or type all information, except signatures.

City or Town of: Lynnfield

Reporting Period: Beginning: 4/6/2021

(MM/DD/YYYY)

Ending: 5/13/2021

2023 MAY 13 A 9:11
(MDDb/MAY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary

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

[illegible]



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

[illegible]

2022 JAN 11 PM 1:06

City or Town of: Lynnfield

Reporting Period: Beginning: 05/13/2021

Ending:

1/11/2022

(MM/DD/YYYY)

12 IN CLERKS OFFICE

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

[illegible]



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 NOV 3 AND 59 Beginning Date: 1/21/2021 Ending Date: 10/31/2021

Type of Report: (Check one)

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

Candidate Full Name (if applicable)

Office Sought and District

Residential Address

E-mail:

Phone # (optional):

Together We Grow

Committee Name

Bridget F. Charville

Name of Committee Treasurer

9 Willard Ln, Lynnfield, MA, 01940

Committee Mailing Address

E-mail:

bridget.fallon@gmail.com

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

\$20.28

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

\$0

Line 3: Subtotal (line 1 plus line 2)

\$20.28

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

\$20.28

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 Cooperative 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:

Bridget F. Charville

(Treasurer's signature)

Date:

10/31/21

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:

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
2/17/ 2021	Wakefield Item	26 Abdon St. Wakefield, MA 01880	Newspaper ad	20.00
9/13/ 2021	Town of Lynnfield	55 Sumner St. Lynnfield, MA 01940	Close-out donation	0.28

Line 12: Total Expenditures over \$50 (or listed above)	\$20.28
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Line 13: Total Expenditures \$50 and under* (not listed above)	—
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Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD	\$20.28
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* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.



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

City or Town of: Lynnfield

Reporting Period: Beginning: 01/01/2021

Ending: 12/31/2021

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

DATE	PRINT NAME	SIGNATURE Signed under the penalties of perjury	RESIDENTIAL ADDRESS (Street and Number)	OFFICE SOUGHT
01/04/2022	Richard P Dalton		18 Partridge Lane	Selectman
1/13/2022	Faith Honer-Coakley		29 Bancroft St	Library Trustee
1/13/2022	Richard J. Mazzoni		14 Lydon Ave	Library Trustee
1/19/2022	Andrew P. Kenneally		8 Lovell Rd	Library Trustee
1/26/2022	Joseph P. Connon		3 Stone Lane	SELECTMAN
Received 1/27/2022	Michael DeRizis/Kate DeRizis		38 W Huckleberry Rd	School Committee

RECEIVED
Please print or type all information, except signatures.

2022 JAN 12 P 1:00
(MM/DD/YYYY)
TOWN CLERK'S OFFICE
LYNNFIELD, MA