

Form CPF M 102: Campaign Finance Report

Mar 24, 2023 1:14 pm

Municipal Form Town Clerk's Office Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 1/1	/2023	Ending D		Clerk or Election Commission
Type of Report: (Check one)				
8th day preceding preliminary 8th day preceding election	☐ 30 day a	after election	year-end repo	ort dissolution
JOhn D. Leone Candidate Full Name (if applicable)	Committ	ee to Elect John	D. Leone Committee Name	
Select Board	Cuzanno	M. Lindner	Committee Name	
Office Sought and District	- Suzailile		ne of Committee Treasi	urer
541 Irving St., Arlington, MA 02476	637 Mass	s. Ave., Arlingto	n. MA. 02476	
Residential Address			mmittee Mailing Addre	ess
E-mail: John@Leoneselectboard.com	E-mail:	Jo	hn@LeoneSlectbo	ard.com
Phone # (optional): 781-641-3546	Phone # (or	otional):	781-648	-2345
SUMMARY BALAN	CE INFOR	RMATION:		
Line 1: Ending Balance from previous report			1,7	721.05
Line 2: Total receipts this period (page 3, line 1)	1)		6,1	150.00
Line 3: Subtotal (line 1 plus line 2)			7,8	371.05
Line 4: Total expenditures this period (page 5, li	ne 14)		51	135.87
Line 5: Ending Balance (line 3 minus line 4)			2,7	735.18
Line 6: Total in-kind contributions this period (p	page 6)		4	400.00
Line 7: Total (all) outstanding liabilities (page 7) [0.00
Line 8: Name of bank(s) used: Leader Bank. N.A.				
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-kin finance activity of all persons acting under the authority of on behalf of this committee. Signed under the penalties of perjury:	d contributions a	nd liabilities for this	reporting period and re of M.G.L. c. 55.	
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 11	oox only)			
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to t activity, of all persons acting under the authority or on behalf of this committee in incurred any liabilities nor made any expenditures on my behalf during this reporting	he best of my kno	the requirements of	M.G.L. c. 55. I have no	
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to t finance activity, including contributions, loans, receipts, expenditures, disbursemen campaign finance activity of all persons acting under the authority or on behalf of the contributions.	its, in-kind contri	butions and liabiliti	es for this reporting per	riod and represents the
Signed under the penalties of perjury:		(Candidate's	Da ^s	te: 3/24/2023

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.)

	Name and Residential Address		Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
2/9/2023	Harry Allen 7 Abcon St. Arlington,MA	500.00	self emplyed,	
2/22/23	Angela and Sean Alton 91 HArlow St. Arlington,MA	100.00		
3/22/23	Eddie Barrert 11 MArathonb St. Arlington,MA	100.00		
3/2/23	Robert Bowes 26 Lakeview Street 26 Lakeview Street	300.00	retired	
3/2/23	Timothy Buckley 108 Rawson Rd. Arl. MA.	25.00		
2/22/23	Alfred DeVito 1145 MAss. Ave. 26 Lakeview Street	250,00	Devito Funeral Home Funeral Director	
3/12/2023	John DeVito 19 Washington Avenue 19 Washington Avenue	250.00	Devito Funeral Home Funeral Director	
3/13/2023	Jonathan DeVito 63 Lennon Rd Arl. MA.	250.00	Devito Funeral Home Funeral Director	
3/21/23	Laura DiStasio 41 Wildwood Ave. Arlingotn, MA.	50.00		
3/19/2023	Christine Dorchak 11A Lake View Street	50.00		
2/22/23	MaryAnna Foskett 101 Brantwood Rd. Arlingotn, MA.	150.00		
2/11/23	Jon Gersh 24 Kipling Rd. Arlington, MA.	25.00		
Line 9: Total Rece	ipts over \$50 (or listed above)	2,050.00		
Line 10: Total Rece	eipts \$50 and under* (not listed above)			
Line 11: TOTAL 1	RECEIPTS IN THE PERIOD	2,050.00	← Enter on page 1, line 2	
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^{*} 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)
2/22/23	John Gillis Pleasant St. Arl. MA.	200.00	self employed Attorney at Law
2/22/23	Katherine Griffin 7 Exeter St. Arl. MA.	25.00	
2/22/23	Bill and Bonnie Hayner 19 Putnam Rd. Arl. MA.	50.00	
3/21/23	Kenneth Hughes 20 Webster St. Arl. MA.	100.00	
2/22/23	Mark Kaeppleiin 11 Palmer St Arlington, MA.	50.00	
2/22/23	John Kneeland 11 Winslow St. Arlington, MA.	100.00	
2/6/23	Charles Kalivas RidgeSt. Arlington,	100.00	
2/16/23	Winston Langley Hutchson Rd. Arl. MA.	500.00	Retired - Umass Boston Provost / Author
2/5/23	Adrian Leone 12 Marrium St. Lexingotn, MA.	100.00	
2/26/23	John Mahoney 35 Newland Road Arl. MA.	100.00	
L/26/23	Cheryl Marceau 10 Cleveland St. Arl. MA.	100.00	
2/20/23	John Maher 990 Massachusetts Avenue Arl. MA.	50.00	
2/9/23	Richard Meguerditchian 635 MAss. Ave. Arl. MA.	200.00	R.M. Realty - Property Management
Line 9: Total Rece	ipts over \$50 (or listed above)	1,675.00	
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL 1	RECEIPTS IN THE PERIOD	1,675.00	← Enter on page 1, line 2

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

Committee Name:	Committee to	Elect John D.	LEone, S	Select Board

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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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/20/23	Deborah Nowell 101 Hillside Ave Arl. MA.	500.00	Self Employed Attorney at Law
3/15/2023	James O'Brien 8 Wall St Arl. MA.	25.00	
1/28/2023	Kelsie O'Flanagan 103 Ninth St Boston, MA.	25.00	
2/18/2023	Paul Olsen 89 wright street Arl. MA.	75.00	
2/22/2023	Gene O'Niell 18 Spy Pond PArkway Arl. MA.	100.00	
2/18/2023	Paul Parise 106 Hemlock St Arl. MA.	100.00	
1/25/2023	Judson Pierce 42 Draper Avenue Arl. MA.	50.00	
`2/6/2023	Pasquale Oppedisano 5 Farmer Circle Arl. MA.	100.00	
2/14/2023	Joyce Radocia 56 Columbia Rd. Arl. MA	50.00	
3/9/2023	Tom Reidy, III 53 Candia Street Arl. MA.	50.00	
2/16/2023	RoseMary Schulze 111 Pleasant St. Arl. MA.	200.00	Retired
2/2/2023	Renee Taketomo 48 Irving Street Arlington, MA.	500.00	self employed Psychologist
Line 9: Total Rece	ipts over \$50 (or listed above)	1775.00	
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
ine 11: TOTAL I	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

Committee Name: Committee to Elect John D. LEone, Select Board

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SCHEDULE A: RECEIPTS (continued)

	Name and Designation 11	1 2 10 (00	,
Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
2/14/2023	Michael Tarantino 1090 Mass Ave. Arl. MA.	100.00	
3/20/2023	Carey Theil 11A Lake View Street Arlingotn, MA.	200.00	GREY2K USA - Exec. Director
2/22/2023	Rose Villandry 63 Tufts St. Arl. Ma	100.00	
3/15/2023	Theeresa Walsh 520 High St.Apt.29D Medrford, MA.	50.00	
3/14/2023	Jordan Weinstein 23 Lennon Rd. Arl. MA.	100.00	
2/22/2023	John Worden 27 Jason St. Arlington, MA.	100.00	
Line 9: Total Rece	ipts over \$50 (or listed above)	650.00	
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL 1	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
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^{*} 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.)

Data Bald	To Whom Paid		D CE 14	
Date Paid	(alphabetical listing)		Purpose of Expenditure	Amount
2/11/2023	Boyds Direct	100 Maple St., Stoneham, MA. 02180	rd Signs	889.85
3/6/2023	Boyds Direct	100 Maple St., Stoneham, MA. 02180	rd and Rally signs	430.32
3/13/2023	Boyds Direct	100 Maple St., Stoneham, MA. 02180	ailer	3.636.92
1/26/2023	Leader Bank	141 Mass. Ave. Arlington, MA. 02474	nk fee	16.95
3/24/2024	Shattucks HArdware	Mill St. Arlington, MA.	gn holders	30.50
3/24/2024	Paypal fee	pro	ocesswing fee	131.33
				Harris and the second s
	L	Line 12: Total Expenditures over \$	(50 (or listed above)	
		Line 13: Total Expenditures \$50 and	d under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITUR	ES IN THE PERIOD	5135.87

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

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SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid						
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount			
			,				
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ŀ							
		Line 12: Expenditures over \$50	(or listed above)				
		Line 13: Expenditures \$50 and to	under* (not listed above)				
		Time 14. TOTAL ENGINEERING	IIDEC IX THE DEDICE				
		Line 14: TOTAL EXPENDIT	hould include only those expenditure				

^{*} 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
	George Mullins		food services	
2/22/2023	Belmont MA			175.00
3/19/2023	Gurinda and Jaspal Pabla 39 Menotomy Rd. Arl. MA.		food service	225.00
	V-	Line 15: In-Kind Contribution	as over \$50 (or listed above)	
		Line 16: In-Kind Contribution	s \$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND (CONTRIBUTIONS	400.0

^{*} 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.

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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
			DING LIABILITIES (ALL)	