



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/2013 Ending Date: 06/17/2013

Type of Report: (Check one)

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

SCOTT F. LEWON
Candidate Full Name (if applicable)
WARD ONE ALDERMAN
Office Sought and District
55 JACKSON RD NEWTON
Residential Address
Telephone Number (optional): _____

Committee to Elect Scott F. Lewon
Committee Name
Anthony F. Gentile
Name of Committee Treasurer
P.O. Box 600448 Newton 02460
Committee Mailing Address
Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>17,107.33</u>
Line 2: Total receipts this period (page 3, line 11)	<u>2,250.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>19,357.33</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>3,540.53</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>15,816.80</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 Village 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: Anthony F. Gentile (Treasurer's signature) Date: 6/15/13

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.

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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 6/15/13

S. Lennon - 1/1/2013 - 6/17/2013

SCHEDULE A - RECEIPTS

Last	First	Amount	#	Address	City	ST	Zip	Occupation	Employer
Leitch	Brad	\$ 500	55	Circuit Avenue	Newton	MA	02461	Police Officer	Newton Police Department
Franchi	Robert	\$ 150	290	Adams Street	Newton	MA	02458		
Franchi	Joanne	\$ 150	290	Adams Street	Newton	MA	02458		
Marini	Ron	\$ 150	14	Aspen Avenue	Newton	MA	02466		
Marini	Angela	\$ 150	14	Aspen Avenue	Newton	MA	02466		
Mazzola	Anthony	\$ 150	27	Colonial Avenue	Newton	MA	02460		
Mazzola	Lucy	\$ 150	27	Colonial Avenue	Newton	MA	02460		
Roche	Karl	\$ 150	78	Fessenden Street	Newton	MA	02460		
Roche	Jessica	\$ 150	78	Fessenden Street	Newton	MA	02460		
Franchi, Jr	Robert	\$ 150	37	Riverdale Avenue	Newton	MA	02458		
Franchi	Rachel	\$ 150	37	Riverdale Avenue	Newton	MA	02458		
Rossi	Dino	\$ 125	248	Valentine Street	Newton	MA	02465		
Rossi	Cindy	\$ 125	248	Valentine Street	Newton	MA	02465		
		\$ 2,250							

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
1/14	Boys + Girls Club	WATERTOWN ST NEWTON MA	DONATION	550.00
1/14	NON AUTUM XMAS PARTY	CALIFORNIA ST NEWTON MA	DONATION	250.00
5/22	RICHARD ADVERTISING	36 TERRA ST DORCHESTER MA	SIGNS	197.81
5/27	CANNOLLY PRINTING	178 GILL ST WOBURN MA	PRINTING SERVICES	822.72

Line 12: Total Expenditures over \$50 (or listed above)	3540.53
Line 13: Total Expenditures \$50 and under* (not listed above)	-
Line 14: TOTAL EXPENDITURES IN THE PERIOD	3540.53

Enter on page 1, line 4 →

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

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may 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
* 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.			Line 15: In-Kind Contributions over \$50 (or listed above)	
Enter on page 1, line 6 →			Line 16: In-Kind Contributions \$50 & under (not listed above)	
			Line 17: TOTAL IN-KIND CONTRIBUTIONS	<i>0</i>

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)	<i>0</i>