



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: 5/31/2011 Ending Date: 10/21/2011

Type of Report: (Check one)
 8th day preceding preliminary 8th day preceding election 30 day after election year-end report resolution

ALLAN L CICCONI JR
Candidate Full Name (if applicable)

ALDERMAN AT LARGE WARD 1
Office Sought and District

22 WEST ST NEWTON, MA 02458
Residential Address

Telephone Number (optional): _____

COMMITTEE TO ELECT ALLAN L CICCONI JR
Committee Name

DIANA FORGIONE
Name of Committee Treasurer

22 WEST ST NEWTON, MA 02458
Committee Mailing Address

Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>185.49</u>
Line 2: Total receipts this period (page 3, line 11)	<u>2308.99</u>
Line 3: Subtotal (line 1 plus line 2)	<u>2494.48</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>1200.00</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>1294.48</u>
Line 6: Total in-kind contributions this period (page 6)	<u>267.50</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>-0-</u>
Line 8: Name of bank(s) used:	<u>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: _____ (Treasurer's signature) Date: 10/31/11

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: 10/31/11

CICCONI

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)
6/25/2011	BRUN BALDER 32 MARANT RD NEEDHAM, MA	500.00	INTERNATIONAL METAL STOUGHTON, MA
10/21/2011	ANGELO PAGLINI 200 NEVADA ST NEWTON, MA	250.00	PAGLINI CORP. ADAMS ST NEWTON, MA
10/21/2011	SWIFT LEMMON 65 JACKSON RD NEWTON, MA	250.00	MIDDLESEX CO SHERIFFS OFFICE CAMBRIDGE, MA
6/21/2011	EDUARDO GOURDEAU JR 94 CLEARWATER RD NEWTON, MA	50.00	
6/25/2011	LEONARD CENTILE 99 ASPEN AVE NEWTON, MA	50.00	
6/25/2011	LEONARD CENTILE 99 ASPEN AVE NEWTON, MA	50.00	
10/21/2011	FRED SAURO 50 WOK ST NEWTON, MA	40.00	
10/21/2011	SHEILA MICHAEL LINEHAN 45 GRANT ST NEWTON, MA	20.00	
10/21/2011	DECLAN HEALY 41 WILDWOOD AVE NEWTON, MA	50.00	
10/21/2011	Joseph McLaughlin 46 Birchwood St FRAMINGHAM, MA	50.00	
10/21/2011	JOHN LAWN 20 PILGRIM RD WATER TOWN, MA	50.00	
10/21/2011	FRANCIS Y FOLEY III 33 MAGUE AVE W. NEWTON, MA	150.00	

Line 9: Total Receipts over \$50 (or listed above) 1100.00

Line 10: Total Receipts \$50 and under* (not listed above) 360.00

Line 11: TOTAL RECEIPTS IN THE PERIOD 1460.00

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above. ← Enter on page 1, line 2

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/21/2011	JEFFREY DE SANTIS 885 WASHINGTON ST APT 3 NEWTON VILL, MA	100.00	
10/21/2011	GERARD MARROCO 114 WELD ST W. ROXBURY, MA	25.00	
10/21/2011	MARK W ROACHE 30 CURVE ST SHERBORN, MA	49.00	
10/21/2011	MITCH BAKER 42 MURRAY RD W. NEWTON, MA	49.99	
10/21/2011	ANTONIO + COLIEN BIANCHI 15 QUONIAL AVE NEWTON, MA	50.00	
10/21/2011	PAUL CAMILLI 59 CLINTON ST NEWTON, MA	100.00	
10/21/2011	ROBERT KRAUSS 166 EDINBORO ST NEWTONVILLE MA	50.00	
10/21/2011	FRANCO + ELIZABETH BATTISTA 25 DALRY ST NGLTON, MA	50.00	
10/21/2011	THOMAS + MAIREAD DEVLIN 30 JASSET ST NEWTON, MA	100.00	
10/21/2011	JILL RYAN 10 CHERRY PL W. NEWTON, MA	50.00	
10/21/2011	CHARLES N SHAPIRO 67 WALNUT HILLES NEWTON, MA	25.00	
10/21/2011	ELLEN BROWN-CI POMA 262 DEARL ST NEWTON, MA	50.00	
10/21/2011	GEORGE + VIRGINIA GARDNER 48 WILLIAM ST W. NEWTON, MA	25.00	

Line 9: Total Receipts over \$50 (or listed above) 300.00

Line 10: Total Receipts \$50 and under* (not listed above) 424.99

Line 11: **TOTAL RECEIPTS IN THE PERIOD** **698.99**

← 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)
10/21/2011	LAURIE DUFFY PANARITI 46 WALNUT PK NEWTON, MA	25.00	
10/21/2011	JOHN + JULIA DALY 22 WILTSHIRE RD NEWTON, MA	50.00	
10/21/2011	CHARLES CREMENS 19 BEACON ST BOSTON, MA	50.00	
10/21/2011	MIRIAM + JAMES ACANDYDY 36 JASSET ST NEWTON, MA.	25.00	
10/21/2011	DAVID W IRLAND 42 RICHARDSON ST NEWTON, MA	50.00	
10/21/2011	LUCIA + RALPH SCHIAVONE 24 WILSON CIRCLE NEWTON HIGHLANDS, MA	50.00	

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 (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
7/6/2011	NEWTON VETERAN'S COUNCIL	NEWTON, MA	DONATION	500.00
10/21/2011	ST. MARY OF CARMEL SOCIETY	NEWTON, MA	DONATION	250.00
10/21/2011	MARGARET CROWN	105 FAIR OAKS AVE NEWTONVILLE, MA	CATERING / FOOD	450.00

Line 12: Expenditures over \$50 (or listed above)	1200.00
Line 13: Expenditures \$50 and under* (not listed above)	
Line 14: TOTAL EXPENDITURES IN THE PERIOD	1200.00

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
1/22/2011	SONS of ITALY ADAMS ST NEWTON	ADAMS ST NEWTON, MA	DONATION of RAYGULET HALL	267.50
Line 15: In-Kind Contributions over \$50 (or listed above)				267.50
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				267.50

* 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.

