



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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2021 JAN 19 AM 11:08

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 12/21/21 Ending Date: 12/31/20

Type of Report: (Check one)

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

Shawn Fitzgibbons
Candidate Full Name (if applicable)

Newton School Committee, Ward 6
Office Sought and District

300 Homer Street, Newton, MA 02459
Residential Address

E-mail: SPFITZ@GMAIL.COM

Phone # (optional): 617 997 2577

Committee to Elect Shawn Fitzgibbons
Committee Name

Sara Penn
Name of Committee Treasurer

300 Homer St., Newton, MA 02459
Committee Mailing Address

E-mail: SARAKPENN@GMAIL.COM

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>N/A</u>
Line 2: Total receipts this period (page 3, line 11)	<u>\$ 3800.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>\$ 3800.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>\$ 146.22</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>\$ 3653.78</u>
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:	<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: Sara Penn (Treasurer's signature) Date: 1/14/21

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: SPJ (Candidate's signature) Date: 1/18/21

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)
12/31/20	Alicia Bowman 19 Chestnut Terrace Newton, MA 02459	250.00	unemployed
12/31/20	Elizabeth Cooper 43 Waban Hill Rd. Chestnut Hill, MA 02467	100.00	
12/31/20	Erik Diehn 39 Park Road Maplewood, NJ 07040	250.00	Sirius XM
12/30/20	Carol Fernandez 31 Locksley Rd Newton, MA 02459	100.00	
12/22/20	Shawn Fitzgibbons 300 Humer St. Newton, MA 02459	100.00	
12/31/20	Janice Fitzgibbons 61 Malden St. West Baylston, MA 01583	100.00	
12/31/20	Robert Gifford 41 Oxford Rd. Newton, MA 02459	500.00	unemployed
12/31/20	Rhanna Kidwell 56 Kenwood Ave. Newton, MA 02459	100.00	
12/31/20	Samuel Madden 46 Newbury St. Newton, MA 02458	250.00	MIT
12/31/20	Jay Ravell 325 S. Harvey Oak Park, IL 60302	500.00	Illinois
12/31/20	Claire Skoloff 41 Oxford Rd. Newton, MA 02459	500.00	unemployed
12/31/20	Debbie Wisel 44 Oakland Rd Maplewood, NJ 07040	500.00	Swing Search

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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
12/31/00	Peter Wisse 579 Saganbore Ave #75 Rtsmouth, NH 03801	500.00	unemployed

Line 9: Total Receipts over \$50 (or listed above) \$ 3750.00

Line 10: Total Receipts \$50 and under* (not listed above) \$ 50.00

Line 11: TOTAL RECEIPTS IN THE PERIOD \$ 3800 ← 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
12/31/20	AA Blue	366 Summer St. Somerville, MA 02144	Processing fee	142.22
Line 12: Total Expenditures over \$50 (or listed above)				\$ 142.22
Line 13: Total Expenditures \$50 and under* (not listed above)				\$ 4.00
Line 14: TOTAL EXPENDITURES IN THE PERIOD				\$ 146.22

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 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)	

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		Line 12: Expenditures over \$50 (or listed above)		
		Line 13: Expenditures \$50 and under* (not listed above)		
Enter on page 1, line 4 →			Line 14: TOTAL EXPENDITURES IN THE PERIOD	

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