



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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2021 OCT 25 PM 2:45
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 1, 2021 Ending Date: October 24, 2021

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)
School Committee Member, Ward 6
Office Sought and District
300 Homer Street, Newton, MA 02459
Residential Address
E-mail: shawn@shawnfitzgibbons.com
Phone # (optional): _____

Committee to Elect Shawn Fitzgibbons
Committee Name
Sara Penn
Name of Committee Treasurer
300 Homer Street, Newton, MA 02459
Committee Mailing Address
E-mail: sarapenn@gmail.com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	3653.78
Line 2: Total receipts this period (page 3, line 11)	17828
Line 3: Subtotal (line 1 plus line 2)	21481.78
Line 4: Total expenditures this period (page 5, line 14)	18138.47
Line 5: Ending Balance (line 3 minus line 4)	3343.31
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: Sara Penn (Treasurer's signature) Date: 10/25/21

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: 10/25/21

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)
Line 9: Total Receipts over \$50 (or listed above)			← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

* 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

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Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
8/31/21	Jen Abbott 26 Whitney Road Newton, MA 02460	150	
9/14/21 and 10/11/21	Hannah Banks 107 Garland Road Newton, MA 02459	200	Architect
9/14/21	CTE Bryan Barash 167 Lowell Avenue Newton, MA 02460	100	
5/5/21	Aaron Brickman 8904 Falls Chapel Way Potomac, MD 20854	118	
8/10/21	Michael Broad 65 Walden Street Newtonville, MA 02460	100	
5/28/21	Marilyn Campbell 255 Mill Street Newton, MA 02460	250	Unemployed
2/15/21	Nick Carter 51 Fisher Avenue Newton, MA 02461	100	
6/22/21	Dan Clifford 33 Andrew Street Newton Highlands, MA 02461	100	
1/3/21	Maria Conroy 280 Highland Avenue West Newton, MA 02465	100	
10/11/21	Cynthia Creem 110 Huntington Road Newton, MA 02458	200	State Senator
1/5/21	Krista Cruz 72 Arlington Street Newton, MA 02458	100	
10/21/21	Timothy Curry 59 Winfisky Drive Stoughton, MA 02072	100	
Line 9: Total Receipts over \$50 (or listed above)		1618	
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)
1/5/21	Victoria Danberg 309 Chase Street Newton, MA 02459	100	
8/19/21	Susan Davidoff 24 Bridge Street Newton, MA 02458	250	unemployed
5/3/21	Nadav Efraty 1022 Beacon Street Newton, MA 02459	250	Business manager at Desalitech, a Dupont Brand
9/15/21	CTE Diana Fisher Gomez 275 Islington Road Auburndale, MA 02466	100	
9/2/21	Lorenz Glaser 20 Auburndale Ave. West Newton, MA 02465	100	
10/12/21	Frances Godine 19 Crofton Road Newton, MA 02468	100	
9/17/21 and 10/22/21	Barbara Gutman 160 Boylston St., Apt. 1302 Newton, MA 02467	200	Consultant
9/16/21	Erin Hanley 2282 Commonwealth Ave. Auburndale, MA 02566	250	Registered Nurse
10/7/21	Jane Harper 11 Fenno Road Newton, MA 02459	100	
4/7/21	Susan Heyman 70 Varick Road Waban, MA 02468	250	unemployed
9/9/21	Kathleen Hobson 128 Dorset Road Waban, MA 02468	500	unemployed
5/6/21	Sarah Housman 64 Homer Street Newton, MA 02459	100	
1/3/21	David Jellinek 132 Pleasant Street Newton, MA 02459	100	

Line 9: Total Receipts over \$50 (or listed above) 2400

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

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)
1/4/21	Barbara John 662 Boylston Street Newton, MA 02459	100	
9/29/21	Phyllis Kirschner 20 Gralynn Rd. Newton, MA 02459	180	
1/4/21, 9/8/21, 10/14/21	Kenneth Krems 55 St. Mary's Street Newton, MA 02462	525	Attorney
9/25/21	Alison Leary 192 Chapel St. Newton, MA 02458	100	
1/9/21 and 9/25/21	Heather Mack 63 Gammons Road Waban, MA 02468	1000	unemployed
10/20/21	Samuel Madden 46 Newbury Street Newton, MA 02459	250	Professor
10/4/21	Karen Manning 59 Kirkstall Road Newton, MA 02460	150	
9/14/21	Kathleen McIntosh 164 Norfolk St. Holliston, MA 01746	100	
1/25/21	Jesse Mermell 149 Winthrop Road #8 Brookline, MA 02445	100	
2/15/21	Matthew Miller 26 Shute Path Newton, MA 02459	100	
1/25/21, 9/13/21, 10/21/21	Lisa Monahan 1105 Walnut Street Newton, MA 02461	300	Architect
9/16/21	Gerald Morgan 82 Miller Road Newton, MA 02459	250	Engineer
Line 9: Total Receipts over \$50 (or listed above)		3,555	
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)
9/16/21	Emily Murphy 47 Ellison Road Newton, MA 02459	250	Lawyer
4/7/21	Brenda Noel 1025 Walnut Street Newton, MA 02461	100	
2/16/21	Judith Norsigian 43 Waban Hill Road N. Chestnut Hill, MA 02467	100	
10/12/21	Mary Margaret Pappas 70 Prospect Street W. Newton, MA 02465	100	
9/23/21	Lucia Pastorino 101 Garland Road Newton, MA 02459	100	
1/8/21, 10/21/21	Dan Powdermaker 119 Lincoln Street Newton, MA 02461	100 150	
6/22/21 and 10/15/21	Jim Rapoport 491 Waltham St. Unit 2 W. Newton, MA 02465	200	unemployed
1/13/21	Abby Rordorf 49 Bowdoin Street Newton, MA 02461	100	
6/22/21	Susan Rosenbaum 121 Winslow Road Waban, MA 02468	100	
10/5/21	William Rosenbaum 17 Burdean Road Newton, MA 02459	100	
1/14/21 and 9/4/21	Rachael Rosner 31 Ripley Street Newton, MA 02459	100	
9/25/21	Julie Salinger 61 Beaumont Avenue Newtonville, MA 02460	100	
9/26/21	Kathleen Scully Hodges 785 Centre Street Newton, MA 02458	100	
Line 9: Total Receipts over \$50 (or listed above)		1600	
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

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)
9/17/21	Paul Sears 662 Boylston Street Newton, MA 02459	100	
8/24/21	Cindy Shulak-Rome 61 Winthrop Street Newton, MA 02465	100	
10/3/21	Raktim Sinha 21 White Avenue Newton, MA 02459	100	
2/5/21 and 9/14/21	Donna Sirutis 19 Grant Street Newton, MA 02465	300	Attorney
4/6/21	Andrew Slade 292 N. 2nd St., Apt. 3F Philadelphia, PA 19106	100	
1/21/21	Peter Slavin 119 Waban Avenue Waban, MA 02468	1000	President of Massachusetts General Hospital
2/1/21	Lori Slavin 119 Waban Avenue Waban, MA 02468	1000	Artist
10/4/21	Nissan Sonauta 15 Clinton Place Newton, MA 02459	100	
1/21/21	Charles Spittel 74 Fenno Road Newton, MA 02459	100	
9/14/21	Susan St. Pierre 28 Ballard Street Newton, MA 02459	100	
9/29/21	Andrea Streenstrup 21 Kimball Terrace Newton, MA 02460	100	
10/8/21	Karen Sweet 25 Kenmore Street Newton, MA 02459	100	
Line 9: Total Receipts over \$50 (or listed above)		3200	
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)
1/1/21	Ryan Sylvia 21 Orient Avenue Newton, MA 02459	100	
9/17/21	Ruhina Tahir 36 Frederick Newtonville, MA 02460	150	
6/6/21	Jean Weinberg 124 Staniford Street Auburndale, MA 02466	250	Management Consultant
1/13/21, 9/2/21, 10/20/21	Elizabeth Wilkinson 14 Trowbridge Street Newton, MA 02459	275	unemployed
9/3/21	Norah Wylie 16 Cross Street W. Newton, MA 02465	100	
9/9/21	Terry Yoffie 363 Waverley Avenue Newton, MA 02458	100	
3/3/21	Anne Young 170 Tremont Street, Apt. 1001 Boston, MA 02111	1000	Physician
6/22/21	Leslie Ziarko Valera 985 Walnut Street Newton Highlands, MA 02461	100	
10/13/21	NPS Custodians	500	Custodians
10/12/21	Andrew Cohn 29 Jameson Rd. Newton, MA 02458	75	
9/16/21	Jon Horwitz 24 Moreland Ave Newton, MA 02459	75	
9/23/21	Sirimon Parker 40 Whittier Rd Newtonville, MA 02460	75	

Line 9: Total Receipts over \$50 (or listed above)	2800
Line 10: Total Receipts \$50 and under* (not listed above)	3055
Line 11: TOTAL RECEIPTS IN THE PERIOD	17828

Combined Line 9: 14773

← 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
1/3/21 - 10/10/21	ActBlue	366 Summer Street Sommerville, MA 02144	Donation fees	595.51
10/13/21 and 10/19/21	CK Strategies, LLC	11 Beacon Street, Suite 914 Boston, MA 02108	Printers/Mailers	13904.89
1/1/21 - 10/24/21	Google Domains		Website	127.60
8/23/21	Heidi Warner Design	hwernerdesign.com	Design for mailers	200
4/5/21 - 10/6/21	Mailchimp	The Rocket Science Group, LLC 675 Ponce de Leon Avenue NE Suite 5000 Atlanta, GA 30308	Marketing Platform	818.54
8/30/21 and 10/7/21	Potter's Printing	207 Pocasset Street Fall River, MA 02721	Yard Signs	2491.93
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				N/A
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				18138.47

* 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)	
			Line 16: In-Kind Contributions \$50 & under (not listed above)	
			Line 17: TOTAL IN-KIND CONTRIBUTIONS	0

Enter on page 1, line 6 →

* 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