



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

CITY OF WALTHAM
CITY CLERK'S OFFICE

2022 JAN 20 PM 1:27

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

JAN/1/2022

Ending Date:

DEC/31/2021
RECEIVED

Type of Report: (Check one)

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

STEVEN J LYDON

Candidate Full Name (if applicable)

Office Sought and District

32 BENNETT ST. WALTHAM, MA

Residential Address

E-mail: STEVENLYDON@HOTMAIL.COM

Phone # (optional): 781-983-6014

ELECT STEVE LYDON COMMITTEE

Committee Name

ALLISON DOUCETTE

Name of Committee Treasurer

32 BENNETT ST. WALTHAM, MA

Committee Mailing Address

E-mail: ADOUCETTE@ALLISON.NET

Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

728.73

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

728.73

Line 4: Total expenditures this period (page 5, line 14)

0

Line 5: Ending Balance (line 3 minus line 4)

728.73

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:

WATERTOWN SAVINGS 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:

Allison Doucette

(Treasurer's signature)

Date:

1/20/22

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:

Steven J Lydon

(Candidate's signature)

Date:

1/20/22

Watertown

Savings Bank

60 Main Street
Watertown, MA 02472

Statement Ending 12/31/2021





Page 1 of 2

RETURN SERVICE REQUESTED

>000886 6519067 0001 092617 10Z

00827286
HSP 164
ELECT STEVE LYDON COMMITTEE
32 BENNETT ST
WALTHAM MA 02453-6503

Managing Your Accounts

 Customer Support 617-928-9000
 Toll-free 800-207-2525
 Telephone Banking 617-928-2300
 Website www.watertownsavings.com



Summary of Accounts



Account Type	Account Number	Ending Balance
Free Business Checking	0689001624	\$728.73

Free Business Checking - 0689001624

Account Summary

Date	Description	Amount
12/01/2021	Beginning Balance	\$728.73
	0 Credit(s) This Period	\$0.00
	0 Debit(s) This Period	\$0.00
12/31/2021	Ending Balance	\$728.73

Account Activity

Post Date	Description	Debits	Credits	Balance
12/01/2021	Beginning Balance			\$728.73
	No activity this statement period			
12/31/2021	Ending Balance			\$728.73

Overdraft and Returned Item Fees

	Total for this period	Total year-to-date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00

24-hour Hotline for lost or stolen ATM or Debit Cards: 800-554-8969

Member FDIC Member DIF

