

Form CPF M 102: Campaign Finance Report S OFFICE Municipal Form

Office of Campaign and Political Finance

2021 OCT 25 PM 3: 20

	File with: Citylo Town Clerk or Meditor Commission
Fill in Reporting Period dates: Beginning Date: Janu	uary 1, 2021 Ending Date: October 25, 2021
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Joseph Paul LaCava	The Committee to Elect Joey LaCava
Candidate Full Name (if applicable)	Committee Name
Ward 5 City Councillor Office Sought and District	Lauren LaCava Bibbo Name of Committee Treasurer
11 Kenmore Terrace Waltham, MA 02453	11 Kenmore Terrace Waltham, MA 02453
Residential Address	Committee Mailing Address
E-mail: 1placara (gmail. com	E-mail: lauren. m. lacava Pamaul. com
Phone # (optional):	Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	281.40
Line 2: Total receipts this period (page 3, line 11	7144.43
Line 3: Subtotal (line 1 plus line 2)	7425.83
Line 4: Total expenditures this period (page 5, lin	ne 14) 3871.64
Line 5: Ending Balance (line 3 minus line 4)	3554.19
Line 6: Total in-kind contributions this period (pa	age 6) 92.40
Line 7: Total (all) outstanding liabilities (page 7)	0.00
Line 8: Name of bank(s) used: Rockland Trust	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the bes activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: October 25, 2021
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be	ox only)
activity, of all persons acting under the authority or on behalf of this committee in acting incurred any liabilities nor made any expenditures on my behalf during this reporting	
Candidate without Committee OR Candidate with independent activity filing so I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	e best of my knowledge and belief, a true and complete statement of all campaign s, in-kind contributions and liabilities for this reporting period and represents the

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)
8/26/21	Paul Antonellis 60 Capital Street Newton, MA 02458	100.00	
8/26/21	Ralph Bibbo 3 Falconer Circle Waltham, MA 02451	400.00	Surveyor Self Employed
8/26/21	Paul Brasco 19 Crestview Road Waltham, MA 02451	200.00	Funeral Director Brasco Memorial
8/26/21	Wayne Cameron POB 650025 W. Newton, MA 02465	200.00	Self Employed Cameron Plastering
8/26/21	Silvia Caminotto 125 Hammond Street Waltham, MA 02451	200.00	Self Employed Housekeeper
8/26/21	Nicole Carrafiello 13 Cedar Street Waltham, MA 02453	60.00	
8/26/21	Susan M. Clark 205 Villa Street Waltham, MA 02453	100.00	
8/26/21	Jane Coffua 27 Mayall Road Waltham, MA 02453	100.00	
8/26/21	Tom Creonte 73 Jennings Road Waltham, MA 02451	100.00	
8/26/21	Jessica Cusano-Antonellis 101 Heath Place Hastings on the Hudson, NY 11706	100.00	
8/26/21	Russell D'Argento 7 Weston Lane Hopkinton, MA 01748	100.00	
8/26/21	Silvio DiRico 9 Douglas Road Waltham, MA 02453	200.00	Self Employed Boston Time Clock
Line 9: Total Rece	Line 9: Total Receipts over \$50 (or listed above) 1860.00		
Line 10: Total Receipts \$50 and under* (not listed above)		1414.43	
	RECEIPTS IN THE PERIOD	L	← 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)

Poyle abot Street ham, MA 02453 Francis an Street hard, MA 01754 Giordano orton Street ham, MA 02453 Gollinger orton Street ham, MA 02453 Hopkins Newton Street ham, MA 02453 mittee to Elect John Long Pilgrim Road ortown, MA 02472 art Katz 54-1421 ham, MA 02454 Dry LaCava	100.00 100.00 100.00 100.00	
an Street nard, MA 01754 Giordano orton Street nam, MA 02453 Gollinger orton Street nam, MA 02453 Hopkins Newton Street nam, MA 02453 mittee to Elect John Long Pilgrim Road rtown, MA 02472 ert Katz 54-1421 nam, MA 02454	100.00	
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orton Street nam, MA 02453 Hopkins Newton Street nam, MA 02453 mittee to Elect John Long Pilgrim Road rtown, MA 02472 ert Katz 54-1421 nam, MA 02454	100.00	
Newton Street nam, MA 02453 mittee to Elect John Long Pilgrim Road rtown, MA 02472 ert Katz 54-1421 nam, MA 02454	100.00	
Pilgrim Road rtown, MA 02472 ort Katz 54-1421 nam, MA 02454		
54-1421 nam, MA 02454	500.00	
ony LaCaya		
oslie Road nam, MA 02451	250.00	Retired
er LeBlanc Hammond Street #1 nam, MA 02451	200.00	Nurse Spaulding Hospital
LeBlanc owaset Lane nam, MA 02451	100.00	
LeBlanc Trapelo Road aam, MA 02451	100.00	
lammond Street	200.00	Self Employed Realtor
itha Drive	200.00	Sales Stryker
ver \$50 (or listed above)	2250.00	
50 and under* (not listed above)		
		← Enter on page 1, line 2
	LeBlanc Hammond Street ham, MA 02451 Losier eitha Drive ham, MA 02451 ver \$50 (or listed above) \$50 and under* (not listed above) EIPTS IN THE PERIOD	Hammond Street ham, MA 02451 200.00 D Losier eitha Drive ham, MA 02451 200.00 Ver \$50 (or listed above) 2250.00 \$50 and under* (not listed above)

^{*} 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)
8/26/21	John Longmore 22 Potter Road Waltham, MA 02453	100.00	
8/26/21	Jeanne McDonald 53 Lafayette Street Waltham, MA 02453	100.00	
8/26/21	Kevin Parrella 135 Longfellow Road Waltham, MA 02453	100.00	
8/26/21	Rick Pizzi 100 Lincoln Street Waltham, MA 02451	100.00	
8/26/21	Gail St. Cyr 96A Orange Street Waltham, MA 02453	70.00	
8/26/21	Waltham FF Local 866 Union POB 0058 Waltham, MA 02454	250.00	Waltham Fire Fighters
8/26/21	Laborers International Union 7 Laborers Way Hopkinton, MA 01748	500.00	Laborers Union
8/26/21	Dominque Weyl POB 540348 Waltham, MA 02454	300.00	Self Employed Residential Builder
8/26/21	Warren Withrow 36 Kingston Road Waltham, MA 02451	100.00	
Line 9: Total Receipts over \$50 (or listed above)		1620.00	
Line 10: Total Rece	ripts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD	<u> </u>	← 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
10/25/21	Lauren LaCava Bibbo	36 Glen Circle Waltham, MA 02451	Donation Waltham Homecoming Parade	131.6
9/27/21	TPI Solutions INK	45 Calvary Street Waltham, MA 02453	Lawn signs	360.0
9/27/21	TPI Solutions INK	45 Calvary Street Waltham, MA 02453	Postage	740.0
9/30/21	TPI Solutions INK	45 Calvary Street Waltham, MA 02453	Postcard mailing	1133.0
10/7/21	TPI Solutions INK	45 Calvary Street Waltham, MA 02453	Lawn signs and door hangers	658.0
10/14/21	TPI Solutions INK	45 Calvary Street Waltham, MA 02453	Thank you cards	149.0
10/20/21	TPI Solutions INK	45 Calvary Street Waltham, MA 02453	Postage	700.00
			es over \$50 (or listed above) s \$50 and under* (not listed above)	3871.64
	Enter on page 1, line 4 →		DITURES IN THE PERIOD	3871.64

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

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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
8/26/21	Paul LaCava	64 Morton Street Waltham, MA 02453	Food expense for campaign kickoff	92.40
		Line 15: In-Kind Contributions	over \$50 (or listed above)	92.40
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	92.40

^{*} 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.

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