



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

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/20 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

STEVEN J. LYDON

Candidate Full Name (if applicable)

MUNICIPAL LOCAL FILE

Office Sought and District

32 BENNETT ST. WALTHAM, MA

Residential Address

E-mail: STEVENLYDON@HOTMAIL.COM

Phone # (optional): 781 983 6014

LYDON COMMITTEE

Committee Name

ALLISON DOUCETTE

Name of Committee Treasurer

124 BROWN ST. WALTHAM, MA

Committee Mailing Address

E-mail: ELECT STEVE LYDON@GMAIL.COM

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)

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)

Line 8: Name of bank(s) used:

WATER TOWN 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: 1/19/21

### 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: 1/19/21

# Watertown Savings Bank

60 Main Street  
Watertown, MA 02472

**Statement Ending 01/31/2020**

Page 1 of 2

## RETURN SERVICE REQUESTED

>000648 3873873 0001 092617 10Z

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

## Managing Your Accounts



Customer Support 617-928-9000



Toll-free 800-207-2525



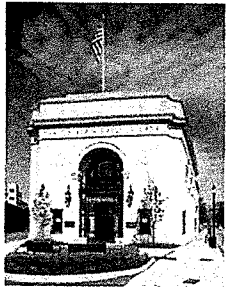
Telephone Banking 617-928-2300



Website [www.watertownsavings.com](http://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
01/01/2020	Beginning Balance	\$728.73
	0 Credit(s) This Period	\$0.00
	0 Debit(s) This Period	\$0.00
01/31/2020	Ending Balance	\$728.73

### Account Activity

Post Date	Description	Debits	Credits	Balance
01/01/2020	Beginning Balance			\$728.73
	No activity this statement period			
01/31/2020	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



00648 3873873 000649 001297 0001/0001

# Watertown

## Savings Bank

60 Main Street  
Watertown, MA 02472

**Statement Ending 12/31/2020**

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### RETURN SERVICE REQUESTED

>000864 5690626 0001 092617 10Z

00952644  
HSP 250  
ELECT STEVE LYDON COMMITTEE  
32 BENNETT ST  
WALTHAM MA 02453-6503

### Managing Your Accounts



Customer Support 617-928-9000



Toll-free 800-207-2525



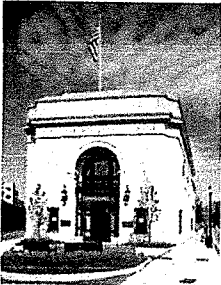
Telephone Banking 617-928-2300



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#### Account Summary

Date	Description	Amount
12/01/2020	Beginning Balance	\$728.73
	0 Credit(s) This Period	\$0.00
	0 Debit(s) This Period	\$0.00
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12/01/2020	Beginning Balance			\$728.73
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