CITY OF WALTHAM CITY CLERK'S OFFICE

2017 SEP 11 A 11: 35

RECORDED



Form CPF M 102-0: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

Commonwealth f Massachusetts		Plea	se print or type all information, except signatures.
City or Town of: Watham Reporting Period: Beginning:	07/01/2017	Ending: 09	01/2017 (MM/DD/YYYY)
Type of Report: (Check One) 8th day preceding preliminary/primary	oreceding election 30th day followi	ng election (town or special)	20th day of January (Year-End report)
Pursuant to M.G.L. Chapter 55: 1. I certify that I am a candidate for or currently hold M. 2. I certify that I have not received any contributions, n. 3. I certify that I do not have a political committee. DATE PRINT NAME 9-11-17 Sucph LaCava	Municipal Office. Inade any expenditures, or incurred any obligations of perjury SIGNATURE Signed under the penalties of perjury August 1 Augu	RESIDENTIAL ADDRESS (Street and Number) // Kenore Ter	do not have a campaign fund in existence. OFFICE SOUGHT Word 5 (Counci)



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: July 1	, 2017 Ending Date: September 1, 2017
Type of Report: (Check one)	
⊗ 8th day preceding preliminary	30 day after election year-end report dissolution
Jeseph Taul LaCova	The Committee to Elect Joey LaCava
Joseph Paul LaCava Candidate Full Name (if applicable)	Committee Name
Ward 5 City Councilor	Lauren LaCava
Office Sought and District	Name of Committee Treasurer
11 Kemnore Terrace Waltham, MA 02453	11 Kenmore Terrace Waltham MA, 02453
Residential Address	Committee Mailing Address
E-mail:	E-mail:
Phone # (optional):	Phone # (optional):
SUMMARY BALANC	E INFORMATION:
SUMMARI BALAICE	
Line 1: Ending Balance from previous report	0.00
Line 2: Total receipts this period (page 3, line 11)	\$4120.00
Line 3: Subtotal (line 1 plus line 2)	\$4120.00
Line 4: Total expenditures this period (page 5, line	e 14) \$2777.75
Line 5: Ending Balance (line 3 minus line 4)	\$1342.25
Line 6: Total in-kind contributions this period (page	ge 6) \$567.00
Line 7: Total (all) outstanding liabilities (page 7)	\$415.00
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 best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind c finance activity of all persons acting under the authority or on behalf of this committee in segmentary. Signed under the penalties of perjury:	ontributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	x 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 activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting	best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period.
Candidate without Committee OR Candidate with independent activity filing sep I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	best of my knowledge and belief, a true and complete statement of all campaign, in-kind contributions and liabilities for this reporting period and represents the committee in accordance with the requirements of M.G.L. c. 55,
Signed under the penalties of periury: Lan Ja Ca-	(Candidate's signature) Date: 9/////

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)
8/3/2017	Paul Antonelis 60 Capital Street Newton MA 02458	\$100.00	
8/7/2017	John Arone 57 Lafayette Street Waltham, MA 02453	\$100.00	
8/3/2017	Alicia Baxter 8 Montview Circle Waltham, MA 02451	\$125.00	
8/3/2017	Joseph & Patricia Burgoyne 144 Kingston Road Waltham, MA 02451	\$100.00	
8/3/2017	Joseph Burgoyne 480 East 7th Street South Boston, MA 02127	\$100.00	
8/1/2017	Matthew Burke 17 Warwick Ave Waltham, MA 02451	\$200.00	Foreman, Cranshaw Development
8/3/2017	Jane Coffua 27 Mayall Road Waltham, MA 02453	\$100.00	
8/3/2017	Michael Destefano 39 Graymore Road Waltham, MA 02451	\$100.00	
8/3/2017	Silvio DiRico 9 Douglas Road Waltham, MA 02453	\$200.00	Boston Clock, self-employed
7/1/2017	John Ehwa 100 Brewster Road Waltham, MA 02451	\$100.00	
8/29/2017	John Gentile 17 Washington Ave Unit 2 Waltham, MA 02453	\$100.00	
8/3/2017	Joseph Giordano 74 Morton Street Waltham, MA 02453	\$100.00	
Line 9: Total Rece	ipts over \$50 (or listed above)	\$1425.00	
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL 1	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)
8/3/2017	Anthony LaCava 2 Cutting Lane Weston, MA 02493	\$100.00	
8/3/2017	Louis LaCava 58 Francis Street Waltham, MA 02453	\$500.00	Bar Manager, Starwood Hotels
8/3/2017	Mary LaCava 58 Francis Street Waltham, MA 02453	\$100.00	
8/3/2017	Suzanne LaCava-Knoiles 69 Jennings Road Waltham, MA 02451	\$100.00	
8/3/2017	Gregory Leblanc 1661 Trapelo Road Waltham, MA 02451	\$150.00	
8/3/2017	Sarah Licato 36 Kenmore Road Waltham, MA 02453	\$225.00	Retired, Belmont Hill
8/17/2017	Robert Marcou 5 Bancroft Street Waltham, MA 02451	\$100.00	
8/3/2017	Walter Ohnemus 611 Center Harbor Neck Road Center Harbor, NH 03226	\$125.00	
7/1/2017	Caroline & Richard Oliveri 10 Kenmore Terrace Waltham, MA 02453	\$200.00	Retired, City of Waltham Retired, Raytheon
8/3/2017	Richard Pizzi 581 Lincoln Street Waltham, MA 02451	\$100.00	
8/3/2017	Robert Pratt 77 Leitha Drive Waltham, MA 02451	\$100.00	
8/26/2017	Gail & Robert St. Cyr 96A Orange Street Waltham, MA 02453	\$100.00	
8/3/2017	Stephen Trundle 153 Grove Street Waltham, MA 02453	\$100.00	
Line 9: Total Rece	ipts over \$50 (or listed above)	\$2000.00	
Line 10: Total Rece	eipts \$50 and under* (not listed above)	\$695.00	
	RECEIPTS IN THE PERIOD	\$4120.00	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.)

-	ditures. Please include your com To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
8/1/2017	TPI Solutipns Ink	45 Calvary Street Waltham, MA 02453-5974	Lawn Signs	\$725.00
8/1/2017	TPI Solutions Ink	45 Calvary Street Waltham, MA 02453-5974	Mailing	\$1,654.20
8/17/2017	Waltham Embroidery & Screen Printing	561 Moody Street Waltham, MA 02453	T-shirts	\$398.55

		Line 12: Total Expenditures	over \$50 (or listed above)	\$2777.75
		Line 13: Total Expenditures	\$50 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPEND	ITURES IN THE PERIOD	\$2777.75

^{*} 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 B: EXPENDITURES (continued)

Data Data	To Whom Paid	Addansa	Purpose of Expenditure	Amount	
Date Paid	(alphabetical listing)	Address	r at hose at exhenations	Amount	
	-				
	Line 12: Expenditures over \$50 (or listed above)				
Line 13: Expenditures \$50 and under* (not listed above)					
Line 14. TOTAL EVDENNITHDES IN THE DEDION					
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD Compared to the state of \$150 and an der include them in line 12. Line 13 should include only those expenditures not itemized.					

^{*} 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
7/25/2017	Paul & Linda LaCava Self-employed Shoppers Cafe	64 Morton Street Waltham, MA 02453	Postage for mailing	\$567.00
				1.00
		Line 15: In-Kind Contributio	ns over \$50 (or listed above)	\$567.00
		Line 16: In-Kind Contribution	ns \$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND	CONTRIBUTIONS	\$567.00

^{*} 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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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
8/24/2017	TPI Solutions Ink	45 Calvary Street Waltham, MA 02453-5974	Door Hangers	\$415.00
	Enter on page 1, line 7	→ Line 18: TOTAL OUTSTA	ANDING LIABILITIES (ALL)	\$415.00