



Commonwealth of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 4/29/17 Ending Date: 12/31/17

Type of Report: (Check one)  
 8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

LAURENCE N. AIELLO  
Candidate Full Name (if applicable)  
SCHOOL COMMITTEE  
Office Sought and District  
4506 DEERFIELD CIRCLE PEAB.  
Residential Address  
E-mail: aiello1aw2003@yahoo.com  
Phone # (optional): 978-535-7011

LAURENCE N. AIELLO  
Committee Name  
FRANCES M. STUART  
Name of Committee Treasurer  
17 BRISTOL RD. PEABODY  
Committee Mailing Address  
E-mail: \_\_\_\_\_  
Phone # (optional): 978.535.6108

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>1685.39</u>
Line 2: Total receipts this period (page 3, line 11)	<u>4827.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>6512.39</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>5799.01</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>- 720.38</u>
Line 6: Total in-kind contributions this period (page 6)	<u>- 0 -</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>- 0 -</u>
Line 8: Name of bank(s) used:	<u>T.D. Bank</u>

#### 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: Frances M. Stuart (Treasurer's signature) Date: 1/19/18

#### FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box 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 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.

##### Candidate without Committee OR Candidate with independent activity filing separate report

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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Laurence N. Aiello (Candidate's signature) Date: 1-19-18

## 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)
5/10/17	Mark Aiello 3 Millbrook Ave Watpole, MA 02081	500.00	Consultant self-employed
4/29/17	Phyllis Aiello 4506 Deerfield Cr. PEABODY	100.00	
5/10/17	Judith Barile 5 Eric Dr Saugus, MA	100.00	
8/30	Angelo Boncore 46 Independence Way Marblehead, MA 01945	100.00	
8/30	Robert & Mary Callahan 56 Russell St. PEABODY	100.00	
5/10	Eugene Constantino 12 Westview Circle PEABODY	100.00	
5/30	Mark D'Annolfo 95 Suffolk Rd Chestnut Hill, MA 02467	100.00	
9/14	Joanne De Rosa 83 Birch St. PEABODY	100.00	
5/16	Roland Gillis 427 Salem St. Unit 38 Seymour, MA	200.00	Retired/Gift
8/16	Donna Gillis Seymour, MA	100.00	
8/16	Carolyea Landry 21 Hodge Rd Arlington, MA	200.00	Gift
9/21	Dorothea Macrina 8 Waldron St Marblehead, MA 01945	100.00	
8/30	Anne Manning 27 Dexter St. PEABODY, MA	100.00	
Line 9: Total Receipts over \$50 (or listed above)			} See Page 3
Line 10: Total Receipts \$50 and under* (not listed above)			
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>			

← 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)
8/16	Joseph Mastrocola 6 57 <sup>th</sup> Street Newbury, MA	200.00	gift
8/30	Orlando Associates 1 Western Ave Gloucester, MA	100.00	
8/30	Carol Pagliaro 14 Pilgrim Rd Marblehead, MA 01945	100.00	
8/30	Louis Perullo 1101 Foxwood Circle PEABODY, MA	150.00	
8/16	Joseph Rocco 9 Blair Terrace PEABODY, MA	200.00	Self-employed ROC Landscaping
5/20	James Sartori 527 Salem St. Unit 31 Lynnfield, MA	100.00	
8/30	Rosemary Sartori 527 Salem St. Unit 31 Lynnfield, MA	100.00	
4/29	FRANCES STUART 17 BRISTOL Rd PEABODY, MA	100.00	
Line 9: Total Receipts over \$50 (or listed above)		2950.00	
Line 10: Total Receipts \$50 and under* (not listed above)		1877.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		4827.00	← 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.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/20	ADVOCATE NEWS	150 A ANDOVER ST DANVERS MA 01923	NEWS ADVERTISEMENT	\$1200.00
8/29	BIG Y MARKET	637 LOWELL ST PEABODY	FOOD FUNDRAISER	76.92
8/14	CHRISTMAS TREE SHOP	655 BROADWAY LYNNFIELD	DECORATIONS FUNDRAISER	31.32
8/29	COSTCO	11 NEWBURY ST DANVERS	MISC. FOR FUNDRAISER	92.43
8/24	ITAL/AMER. CITIZEN CLUB	7 BLANEY AVE. PEABODY	HALL RENTAL FUNDRAISER	225.00
8/29	LYPOS RESTAURANT	637 LOWELL ST PEABODY	PIZZA FUNDRAISER	230.00
8/27	MARKET BASKET	230 S. MAIN ST MIDDLETON	MISC./ FUNDRAISER	76.30
8/15	PARTY CITY	300 ANDOVER ST PEABODY	MISC/ FUNDRAISER	72.29
8/8	THRIFT CO PRINTING	56 PULASKI PEABODY	YARD SIGNS PALM CARDS	894.78
8/27	TOTAL WINES	100 INDEPENDENCE DANVERS	RAFFLES FUNDRAISER	61.08
4/29	USPS	637 LOWELL ST PEABODY	MAILBOX RENTAL	67.00
6/19 4/21	VISTAPRINT		THANK YOU CARDS	51.40
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				3214.01

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





