

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date:	Ending Date: Mallip Mol 26 A 6: 49				
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	TOWN CLERK TOWN OF WESTWOOD year-end report dissolution				
Michael F Walsh	Walsh Committee				
Candidate Full Name (if applicable) Selectman	Committee Name William Kearns				
Office Sought and District	Name of Committee Treasurer				
47 Phillips Brooks Road, Westwood, MA 02090	15 Alcot Lane, Westwood, MA 02090				
Residential Address	Committee Mailing Address				
E-mail:	E-mail:				
Phone # (optional):	Phone # (optional):				
SUMMARY BALANC	CE INFORMATION:				
Line 1: Ending Balance from previous report	340.98				
Line 2: Total receipts this period (page 3, line 11)	5,275				
Line 3: Subtotal (line 1 plus line 2)	5,615.98				
Line 4: Total expenditures this period (page 5, lin	ne 14) 800.12				
Line 5: Ending Balance (line 3 minus line 4)	4,815.86				
Line 6: Total in-kind contributions this period (pa	age 6) 0				
Line 7: Total (all) outstanding liabilities (page 7)	0				
Line 8: Name of bank(s) used: Citizens 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: Candidate with Committee and no activity independent of the committee					
Signed under the penalties of perjury:	(Candidate's signature) Date: May 19, 2017				

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 Received (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)	
Mar 22, 2017	Michael C Akashian, One Peboscot Rd, Natick, MA	250	Attorney, Landman, Akashian, 225 Friend St., Boston, MA	
Mar 22, 2017	Joseph Andrade, 706 B Main Street Woburn, MA 01801		Owner Countryside Limo	
Mar 22, 2017	Kevin Becker, 1227 High Street Westwood, MA 02090	100		
Apr 10, 2017	Daniel Conley, 265 Corey Street West Roxbury, MA 02132	100		
Mar 22, 2017	Thomas DeRosa, 19 Rumford Road West Roxbury, MA 02132	150		
Mar 22, 2017	Basil O. El-Baz, 22 Independence Drive Chestnut Hill, MA 02467	1,000	self-employed/owner, OBE Holdings, LLC	
Mar 9, 2017	Richard DiOrio, 19 Woodward Road, Merrimack, NH 02467	250	MassDOT, 10 Park Plaza, Boston, MA 02110	
Mar 30, 2017	Bette Flemming, 21 Ware St., Somerville, MA 02144		self-employed, Attorney Somerville, MA	
Mar 24, 2017	Robert Jubinville, 487 Adams Street Milton, MA 02186			
Mar 22, 2017	Carolyn Kain, 52 Auriga Street Dorchester, MA 02122			
Mar 22, 2017	Robert Launie, 30 Endicott Street Westwood, MA 02090	200	Attorney Launie & Marino, 120 East St., Westwood, MA 02090	
Mar 22, 2017	Joan and Douglas Mann, 38 Bailey Lane, Dedham, MA 02026	100		
Line 9: Total Receipts over \$50 (or listed above) 4,725		4,725		
Line 10: Total Rece	ipts \$50 and under* (not listed above)	550		
Line 11: TOTAL I	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)
Mar 22, 2017	Paul Marino, Esquire 1200 East Street Westwood, MA 02090	100	(101 CONTITUTIONS OF \$200 OF MOTE)
Mar 22, 2017	Paul McMurtry Committee	100	
Mar 22, 2017	Emily Medina 112 High Rock Lane Westwood, MA 02090	100	
Mar 22, 2017	Robert Morrison 475 Center Street Jamaica Plain, MA 02130	300	Mechanic, MORRISON ANTO RIFE
Feb 27, 2017	Nicholas Restuccia 4 Barnsley Road Lynnfield, MA 01940	150	
Mar 22, 2017	Mary and James O'Sullivan 64 Dean Street Westwood, MA 02090	100	
Mar 22, 2017	Ghassan Samaha 70 Weatherbee Drive Westwood, MA 02090	200	owner Al Wadi Restaurant, West Roxbury, MA
Mar 22, 2017	Walid Samaha \$200 70 Weatherbee Drive Westwood, MA 02090	200	owner Al Wadi Restaurant, West Roxbury, MA
Mar 22, 2017	David Solimine 17 Geraldine Lane Braintree, MA 02184	100	
Apr 10, 2017	Todd Sullivan P.O. Box 830 Westwood, MA 02090	200	Builder Todd D Sullivan Construction
Mar 22, 2017	David Warshay 18 Colby Way Westwood, MA 02090	100	
Line 9: Total Recei	pts over \$50 (or listed above)	4,275	
Line 10: Total Receipts \$50 and under* (not listed above) 550			
Line 11: TOTAL RECEIPTS IN THE PERIOD 5,275 If you have itemized receipts of \$50 and under include them in line 9. Line 10 should be a second of the second			and on page 1, into 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.)

	To Whom Paid		enem pages,	···
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Jan 31, 2017	Citizens Bank		bank fee	9.99
Feb 28, 2017	Citizens Bank	The second control of	bank fee	9.99
Mar 22, 2017	NYAJ Westwood	University Ave.,	Food for Fundraiser	107.73
Mar 29, 2017	Hometown Weekly Publications	Medfield	Advertising	451.5
Mar 31, 2017	Citizens Bank		bank fee	9.99
Apr 3, 2017	Comella's LLC	High St., Westwood	Food for Fundraiser	61.32
Apr 28, 2017	Hometown weekly Publications	Medfield	Advertising	150
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		Line 12: Total Expenditures ov	ver \$50 (or listed above)	800.12
		Line 13: Total Expenditures \$50	0 and under* (not listed above)	0
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	800.12

^{*} 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)

To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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		Line 12: Expenditures over \$50	(or listed above)	
Line 13: Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				
If you have itemized expenditures of \$50 and under, 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
T - T I I I I I I I I I I I I I I I I I	NONE			
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<u> </u>		Lina 15: In Kind Contributions	over \$50 (or listed above)	
		Line 15: In-Kind Contributions		0
		Line 16: In-Kind Contributions \$50 & under (not listed above) 0		
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	0

^{*} 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
	None			
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	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	0