



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

WESTWOOD TOWN CLERK
of Massachusetts
RCVD 2024 APR 22 PM 12:13

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2024 Ending Date: 4/22/24

Type of Report: (Check one)

- 8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

Robert R Gotti
 Candidate Full Name (if applicable)
 Select Board, Westwood, MA
 Office Sought and District
 55 Rock Meadow Road, Westwood, MA 02090
 Residential Address
 E-mail: robert.gotti@me.com
 Phone #: _____

Committee to Elect Robert R Gotti
 Committee Name
 Christopher Giovino
 Name of Committee Treasurer
 476 Everett Street, Westwood, MA 02090
 Committee Mailing Address
 E-mail: ckgiovino@gmail.com
 Phone #: _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>1080.74</u>
Line 2: Total receipts this period (page 3, line 12)	<u>2498</u>
Line 3: Subtotal (line 1 plus line 2)	<u>3578.74</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>489.44</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>3089.30</u>
Line 6: Total in-kind contributions this period (page 6, line 18)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7, line 19)	<u>0</u>
Line 8: Total out-of-pocket expenses this period (page 8, line 22)	<u>0</u>
Line 9: Name of bank(s) used:	<u>Needham Bank, Westwood, MA</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: *Chris Giovino* (Treasurer's signature) Date: 4-22-24

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: *Robert R Gotti* (Candidate's signature) Date: 4/22/24

SCHEDULE A: RECEIPTS

I.G.L. c. 55 requires the name and residential address be reported, in alphabetical order, for all receipts from a contributor over \$50 in the aggregate in a calendar year. In addition, the occupation and employer must be reported for each contributor who contributes \$200 or more in a calendar year. Receipts from a contributor 50 and less in the aggregate in a calendar year can be reported in total without itemization, however, the candidate or committee must keep detailed accounts and records of all contributions received of any amount. In determining aggregate amounts received from a contributor, add monetary as well as in-kind contributions received. If a candidate intends a candidate monetary contribution to be a loan, enter the information on this schedule and on Schedule E Liabilities. Attach additional pages as needed to report all receipts. Please include the candidate or committee name and a page number on each additional page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4/16/2024	Barbera, Michael 8705 Winthrop Drive, Alexandria, VA 22308	100	
3/3/2024	Bean, Charles 700 Clapboardtree Street, Westwood, MA 02090	750	Finance, Heritage Financial Services
1/21/2024	Curtin, Susan 154 Cedar Ln, Westwood, MA 02090	100	
1/21/2024	Gay, Michael 291 Weatherbee Drive, Westwood, MA 02090	100	
3/6/2024	Giovino, Chris 476 Everet Street, Westwood, MA 02090	100	
1/20/2024	Gotti, Robert 55 Rockmeadow Road, Westwood, MA 02090	50	
1/25/2024	Griffin , Daniel and Madeline 37 Whitney Ave, Westwood, MA 02090	100	
1/20/2024	Kelly, Brian 90 Church St, Westwood, MA 02090	250	Lawyer, Nixon Peabody
1/22/2024	Papetti, Sharon 8 Shoe String Ln, Westwood, MA 02090	100	
4/5/2024	Parmelee, Dorothy 88 School Street, Westwood, MA 02090	100	
3/10/2024	Plotkin, Maya 165 Clapboardtree St., Westwood. MA 02090	100	
3/3/2024	Sullivan, Todd 101 Fieldstone rd, Westwood, MA 02090	199	

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Enter receipt totals on Page 3

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
1/21/2024	Ward, Rob 11 Tucks Point Road, Manchester By The Sea, 01944, United	199	
1/20/2024	Warshay, David 18 Colby Way, Westwood, MA 02090	100	
3/7/2024	Weller, Sean 48 Clapboardtree St. #R, Westwood, MA 02090	50	
1/22/2024	Wells, Skip 10 Longwood Drive, Unit 531, Westwood, MA 02090	100	
Line 10: Total Receipts over \$50 (or listed above)		2398	* If you have itemized receipts of \$50 and under, include them in line 10. Line 11 should include only those receipts not itemized above.
Line 11: Total Receipts \$50 and under (not listed above)		100	
Line 12: TOTAL RECEIPTS IN THE PERIOD		2498	

