



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: January 1, 2021 Ending Date: April 2, 2021

Type of Report: (Check one)

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

Charles Dello Iacono (aka Chuck Dello Iacono)
Candidate Full Name (if applicable)

Parks and Recreation Commission
Office Sought and District

67 Barrows Street, Dedham MA 02026
Residential Address

E-mail: chuckdello67@gmail.com

Phone # (optional): 781-915-8696

The Committee to Elect Chuck Dello Iacono
Committee Name

Marianne Martin
Name of Committee Treasurer

15 Holmes Road, Dedham MA 02026
Committee Mailing Address

E-mail: mareken@msn.com

Phone # (optional): 781-696-3218

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	200.00
Line 2: Total receipts this period (page 3, line 11)	2025.00
Line 3: Subtotal (line 1 plus line 2)	2225.00
Line 4: Total expenditures this period (page 5, line 14)	141.22
Line 5: Ending Balance (line 3 minus line 4)	2083.78
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Dedham Savings

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:

Marianne Martin (Treasurer's signature)

Date: 4/1/2021

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:

Charles Dello Iacono (Candidate's signature)

Date: 4/1/2021

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)
3/21/2021	Stephen and Amy Black 165 Adams Street Dedham MA 02026	50	
3/5/2021	Audree and Juliette Bynes 57 Clark Street Dedham MA 02026	50	
3/5/2021	Robert and Christine Coughlin 125 Adams Street Dedham MA 02026	500	
3/13/2021	John Fontaine 82 Shiretown Road Dedham MA 02026	100	
3/10/2021	Dennis Guilfoyle 47 Greensboro Road Dedham MA02026	100	
3/10/2021	John Heffernan 26 Brookdale Avenue Dedham MA 02026	100	
3/23/2021	Leanne Jasset 115 Milton Street Dedham MA 02026	50	
3/4/2021	Marianne Martin 15 Holmes Road Dedham MA 02026	100	
3/5/2021	Francis O'Brien 1000 President's Way #1127 Dedham MA 02026	100	
3/23/2021	Michael Podolski 601 High Street Dedham MA 02026	100	
3/18/2021	Michael Rush PO Box 320275 West Roxbury MA 02132	100	
3/23/2021	Camille Zahka 316 Greenlodge Street Dedham MA 02026	100	
Line 9: Total Receipts over \$50 (or listed above)		1500	
Line 10: Total Receipts \$50 and under* (not listed above)		525	
Line 11: TOTAL RECEIPTS IN THE PERIOD		2025	← 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)

Line 9: Total Receipts over \$50 (or listed above)		
Line 10: Total Receipts \$50 and under* (not listed above)		
Line 11: TOTAL 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 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
3/22/2021	Banners on the Cheap	11525A Stonehollow Dr. Suite 100 Austin, TX, 78758	Vinyl Banners	141.22
Line 12: Total Expenditures over \$50 (or listed above)				141.22
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Line 14: TOTAL EXPENDITURES IN THE PERIOD				141.22

Enter on page 1, line 4 →

* 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 B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

Line 12: Expenditures over \$50 (or listed above)	
Line 13: Expenditures \$50 and under* (not listed above)	
Line 14: TOTAL EXPENDITURES IN THE PERIOD	

Enter on page 1, line 4 →

* 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
Line 15: In-Kind Contributions over \$50 (or listed above)				
Line 16: In-Kind Contributions \$50 & under (not listed above)				
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				

* 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.

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
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				