



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

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2023 MAY -8 PM 2:31

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 3-22-2023 Ending Date: ~~3-22-2023~~ 4-28-23

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

Carmen Dello Iacono Jr.
Candidate Full Name (if applicable)
Planning Board
Office Sought and District
145 W. Jersey Dedham
Residential Address
E-mail: cksdel@aol.com
Phone # (optional): _____

Committee to Elect Carmen Dello Iacono
Committee Name
Kathleen Schortmann
Name of Committee Treasurer
277 Walnut St. Dedham
Committee Mailing Address
E-mail: kaytim@aol.com
Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	\$1177.80
Line 2: Total receipts this period (page 3, line 11)	\$2480.00
Line 3: Subtotal (line 1 plus line 2)	\$3657.80
Line 4: Total expenditures this period (page 5, line 14)	\$1877.91
Line 5: Ending Balance (line 3 minus line 4)	\$1779.89
Line 6: Total in-kind contributions this period (page 6)	\$226.26
Line 7: Total (all) outstanding liabilities (page 7)	\$1370.00
Line 8: Name of bank(s) used:	<u>DEDHAM SAVINGS</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: Kathleen Schortmann (Treasurer's signature)

Date: 05-08-23

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.

Carmen Dello Iacono Jr.

Date: 5-8-2023

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)
03/18/2023	MORONEY DAVID P Address 82 UPLAND RD DEDHAM, MA 02026	100.00	
03/31/2023	David Loewen 243 Colburn Street Dedham, ma 02026	100.00	
03/17/2023	Nancy Knight 150 river Dedham, ma 02026	50.00	VENMO (STATE LAW)
	Lisa Desmond 5 Manning Dedham, Ma 02026	25.00	VENMO (STATE LAW)
	Dan O'neil 16 maverick Dedham, ma 02026	25.00	VENMO (STATE LAW)
	Alan Centofanti 123 busy Dedham Ma 02026	25.00	VENMO (STATE LAW)
	Juliette Byrnes 57 clark Dedham, Ma 02026	40.00	VENMO (STATE LAW)
	Deb Deveer 35 Otis dedham ma 02026	50.00	VENMO (STATE LAW)
	Colin Neary 145 west Jersey Dedham Ma 02026	50.00	VENMO (STATE LAW)
	Carmen DelloIacono III 298 Espana Court Fairfax Virginia 22031	50.00	VENMO (STATE LAW)
	Alissandra Christiani 298 Espana Court Fairfax Virginia 22031	50.00	VENMO (STATE LAW)
	Diane Mcleish 47 Pratt Ave Dedham ma	50.00	VENMO (STATE LAW)
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 A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	Doreen Labrecque 13 ARDMORE RD DEDHAM, MA 02026	50.00	VENMO (STATE LAW)
	Sheila Derby 440 CEDAR ST DEDHAM, MA 02026	50.00	VENMO (STATE LAW)
	Deana DelloIacono 82 CLEVELAND ST DEDHAM, MA 02026	25.00	VENMO (STATE LAW)
	Michael Keller 7 COLUMBIA TER DEDHAM MA 02026	50.00	VENMO (STATE LAW)
	Matt Sheehan 13 Sherwood St. Dedham, MA 02026	50.00	VENMO (STATE LAW)
Line 9: Total Receipts over \$50 (or listed above)		1055.00	
Line 10: Total Receipts \$50 and under* (not listed above)		1425.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		2480.00	← 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
03/30/2023	GO UNION	2600 9TH STREET ST PETERSBURG 33704	MAIL	1877.91
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1877.91

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
03/18/2023	MCLAUGHLIN KATHRYN	Address 16 DELAPA CIR DEDHAM, MA 02026	HALL/FOOD	226.26
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				226.26

* 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. Page 6

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
	CARMEN DELLOTACONO	145 WEST JERSEY		370.00
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				