



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:	Beginning Date: <u>3/25/2024</u>	Ending Date: <u>5/1/2024</u>
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Type of Report: (Check one)

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

Michael J. Widmer
Candidate Full Name (if applicable)

Town Moderator
Office Sought and District

126 Gilbert Road, Belmont, MA 02478
Residential Address

E-mail: michael.j.widmer@gmail.com

Phone #: 617-489-1822

Committee to Re-elect Michael Widmer Moderator
Committee Name

Ellen Schreiber
Name of Committee Treasurer

49 Sandrick Road, Belmont, MA 02478
Committee Mailing Address

E-mail: ellen02478@gmail.com

Phone #: 617-290-6216

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	<u>7801.27</u>
Line 2: Total receipts this period (page 3, line 12)	<u>500</u>
Line 3: Subtotal (line 1 plus line 2)	<u>8301.27</u>
Line 4: Total expenditures this period (page 5, line 15)	<u>8169.81</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>131.46</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>M&T 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: Ellen Schreiber (Treasurer's signature) Date: 5/1/2024

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: Michael J. Widmer (Candidate's signature) Date: 5/1/2024

SCHEDULE A: RECEIPTS

1.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 over \$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)
3/26/2024	M. Patricia Brusch, 54 Radcliffe Rd, Belmont, MA 02478	100	
3/26/2024	John Isaacson, 181 Washington Ave, Cambridge, MA 02140	300	Executive Search; Isaacson, Miller
3/30/2024	Terry Ray, 265 Payson Rd, Belmont, MA 02478	100	

