



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

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TOWN CLERK
BELMONT, MA.

JAN 17 2 27 PM '14

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 8/30/13 Ending Date: 12/31/13

Type of Report: (Check one)

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

Roger Colton	Committee to Elect Roger Colton
Candidate Full Name (if applicable)	Committee Name
Selectman for the Town of Belmont	Gloria Leipzig
Office Sought and District	Name of Committee Treasurer
34 Warwick Road, Belmont, MA	48 Gorham Road, Belmont, MA
Residential Address	Committee Mailing Address
Telephone Number (optional): 489-4569	Telephone Number (optional): 489-4128

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	8400
Line 3: Subtotal (line 1 plus line 2)	8400
Line 4: Total expenditures this period (page 5, line 14)	481.69
Line 5: Ending Balance (line 3 minus line 4)	7918.31
Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	East Cambridge Savings 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: Gloria Leipzig (Treasurer's signature) Date: 1/16/14

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

☒ Candidate with Committee and no activity independent of the 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.

☐ Candidate without Committee OR Candidate with independent activity filing separate report
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 committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: TECH (Candidate's signature) Date: 1-16-14

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)
12/26/13	Anthony Alcorn 172 Waverley Street Belmont, MA 02478	100	
12/11/13	George Bachrach 39 Merrill Road Watertown, MA 02472	250	Attorney ELM 14 Beacon Street, Boston, MA
12/19/13	Kathleen Baskin 73 Munroe Street Belmont, MA 02478	100	
12/14/13	Connie Baw 3304 Bunker Hill Drive North Little Rock, AR 72116	100	
12/19/13	Julia Blatt 27 Skahan Road Belmont, MA 02478	100	
12/13/13	Peter Bleiberg 14 Harris Road Belmont, MA 02478	150	
12/28/13	Frank Burt 25 Brettwood Road Belmont, MA 02478	250	Attorney Boston Properties 800 Boylston Street, Boston, MA
12/21/13	Catherine Bultenwieser 200 Marsh Street Belmont, MA 02478	100	
10/28/13	Lisa Capen-Kesecker 536 Cunningham Woods Drive Moorefield, WV 26836	100	
12/11/13	Susan Centofanti 39 Merrill Road Watertown, MA 02472	250	Administrator Creativity Foundation 112 Bailey Road, Watertown, MA
12/12/13	Roger Colton 34 Warwick Road Belmont, MA 02478	500	Attorney Fisher, Sheehan & Colton 34 Warwick Road, Belmont, MA
12/24/13	Stephen Colton 4541 Nevada Ave. N. New Hope, MN 55428	500	Management Accountant Accounting Insights 4541 Nevada Ave N, New Hope, MN
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)
12/17/13	Mark Davis 30 Emerson Street Belmont, MA 02478	100	
12/21/13	Kate Foster 29 Benton Road Belmont, MA 02478	200	Letters sent 12/27/13 and 1/9/14
12/13/13	Elizabeth Gibson 15 Oakley Road Belmont, MA 02478	100	
12/14/13	Helen Golding 18 Louise Road Belmont, MA 02478	100	
12/21/13	Susan Griffin 9 Anis Road Belmont, MA 02478	100	
12/23/13	Jocelyn Hayes 5 Colonial Terrace Belmont, MA 02478	100	
10/29/13	Steven Hershey 7451 Sprague Street Philadelphia, PA 19119	200	Utility Management Philadelphia Gas Works 800 West Montgomery Ave, Philadelphia, PA
12/20/13	John Howat 168 Amory Street Roxbury, MA 02119	100	
12/28/13	Ralph Jones 26 Prentiss Ln. Belmont, MA 02478	100	
12/20/13	John Kolterman III 107 Orchard Street Belmont, MA 02478	100	
12/4/13	Gloria Leipzig 48 Gorham Road Belmont, MA 02478	100	
12/26/13	Linda Levin-Scherz 75 Woodbine Road Belmont, MA 02478	250	Assistant Director, Tufts Univ. Parents Giving Program Tufts University Medford, MA
12/2/13	John Liepa 603 E. Salem Avenue Indianola, IA 50125	200	Retired
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)
12/12/13	Anne Lougee 34 Warwick Road Belmont, MA 02478	500	Accountant Waldorf School 160 Lexington Street, Belmont, MA
12/23/13	Andrew McClurg 81 Oakley Road Belmont, MA 02478	100	
12/24/13	Cecilia Michaelis 45 Horace Road Belmont, MA 02478	200	Fiber Artist WoolCycles 45 Horace Road, Belmont, MA
12/9/13	Carla Moynihan 67 Silver Hill Road Concord, MA 01742	200	Attorney Robinson & Cole LLP One Boston Place, Boston, MA
12/2/113	David Earl Osterberg 318 - 2nd Avenue N. Mount Vernon, IA 52314	500	Professor University of Iowa, Iowa City 318 2nd Avenue NW, Mount Vernon IA
11/27/13	Charles Peters 551 Walmar Dr. Sun Prairie, WI 53590	55	
12/5/13	Ralph Rosenberg 811 Ridgewood Avenue Ames, IA 50010	75	
5/7/13	Michael Smith 40 Warwick Road Belmont, MA 02478	500	Architect Equus Design Group 40 Warwick Road, Belmont, MA
5/7/13	Rita Smith 40 Warwick Road Belmont, MA 02478	500	Homemaker
12/16/13	Susan Smith 44 Pequossette Road Belmont, MA 02478	200	Not employed
11/26/13	Paul Solomon 19 Lambert Road Belmont, MA 02478	100	
12/24/13	James Staton 92 Long Avenue Belmont, MA 02478	100	
12/14/13	Ellen Sullivan 15 Fairmont Street Belmont, MA 02478	100	
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

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.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
12/26/13	David Webster 18 Holt Street Belmont, MA 02478	100	
Line 9: Total Receipts over \$50 (or listed above)		7480	
Line 10: Total Receipts \$50 and under* (not listed above)		920	
Line 11: TOTAL RECEIPTS IN THE PERIOD		8400	← 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
12/19/13	Roger Colton	34 Warwick Road Belmont, MA	Campaign Mailings -Stamps -Printing and Folding letters	305.66
12/19/13	Roger Colton	34 Warwick Road Belmont, MA	Campaign Mailings -stamps -ream of paper	129.18
12/19/13	Gloria Leipzig	48 Gorham Road Belmont, MA	Campaign Mailings -labels -envelopes	46.85
Line 12: Total Expenditures over \$50 (or listed above)				481.69
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				481.69

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.



Commonwealth
of Massachusetts

Form CPF R 1 : Itemization of Reimbursements

Office of Campaign and Political Finance

Office of Campaign and Political Finance
One Ashburton Place
Boston, MA 02108
(617) 727-8352

Please print or type all information, except signatures.

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

Name of Individual Being Reimbursed: ROGER COLTON

Committee Name: Committee to Elect Roger Colton CPF ID #: _____

Amount of Reimbursement: 305.66

Date of Reimbursement: 12/19/13

ITEMIZE EXPENDITURES IN EXCESS OF \$50

Date Paid	Vendor Name and Address	Purpose of Expenditure	Amount	
9/3/13	11 MT. AUBURN STAPLES WATERTOWN, MA	CAMPAIGN MAILINGS	305	66
		- PRINTING		
		- FOLDING		
		- STAMPS		
Expenditures in excess of \$50 (listed above)			305	66
Expenditures \$50 and under (not listed above)				
TOTAL AMOUNT REIMBURSED			305	66

Signed under the penalties of perjury:

[Signature] 1/16/14
Signature of Candidate/Treasurer

[Signature] 1/16/14
Date

Please use a separate sheet for each reimbursement check issued.



Commonwealth
of Massachusetts

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Please print or type all information, except signatures.

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

Name of Individual Being Reimbursed: Roger COLTON

Committee Name: Committee to Elect Roger Colton CPF ID #: _____

Amount of Reimbursement: \$129.18

Date of Reimbursement: 12/19/13

ITEMIZE EXPENDITURES IN EXCESS OF \$50

Date Paid	Vendor Name and Address	Purpose of Expenditure	Amount	
10/19/13	Staples 11 Mt. Auburn WATER TOWN, MA	CAMPAIGN MAILINGS	129	18
		- 2 ROLLS OF STAMPS		
		- REAM OF PAPER		
Expenditures in excess of \$50 (listed above)			129	18
Expenditures \$50 and under (not listed above)				
TOTAL AMOUNT REIMBURSED			129	18

Signed under the penalties of perjury:

[Signature] 1/16/14
Signature of Candidate/Treasurer

[Signature] 1/14/14
Date

Please use a separate sheet for each reimbursement check issued.



Form CPF R 1 : Itemization of Reimbursements
Office of Campaign and Political Finance

Office of Campaign and Political Finance
One Ashburton Place
Boston, MA 02108
(617) 727-8352

Please print or type all information, except signatures.

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

Name of Individual Being Reimbursed: GLORIA LEIPZIG

Committee Name: Committee to Elect Roger Colton CPF ID #: _____

Amount of Reimbursement: 46.85

Date of Reimbursement: 12/19/13

ITEMIZE EXPENDITURES IN EXCESS OF \$50

Date Paid	Vendor Name and Address	Purpose of Expenditure	Amount	
12/8/13	11 Mt. Auburn STAPLES WATERBURY, MA	CAMPAIGN MAILINGS	46	85
		- Labels		
		- envelopes		
Expenditures in excess of \$50 (listed above)				
Expenditures \$50 and under (not listed above)			46	85
TOTAL AMOUNT REIMBURSED			46	85

Signed under the penalties of perjury:

[Signature] 1/16/14
Signature of Candidate/Treasurer

[Signature] 1/14/14
Date

Please use a separate sheet for each reimbursement check issued.