



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED
TOWN CLERK
BELMONT, MA.

APR 30 2 53 PM '14

File with: City or Town Clerk or Election Commission

| | | | | |
|---------------------------------|-----------------|---------|--------------|--------|
| Fill in Reporting Period dates: | Beginning Date: | 3/15/14 | Ending Date: | 5/1/14 |
|---------------------------------|-----------------|---------|--------------|--------|

Type of Report: (Check one)

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

| | |
|--|---|
| Roger Colton Candidate Full Name (if applicable) | Committee to Elect Roger Colton Committee Name |
| Selectman for the Town of Belmont Office Sought and District | Gloria Leipzig Name of Committee Treasurer |
| 34 Warwick Road, Belmont, MA 02478 Residential Address | 48 Gorham Road, Belmont, MA 02478 Committee Mailing Address |
| Telephone Number (optional): | Telephone Number (optional): |

SUMMARY BALANCE INFORMATION:

| | |
|--|-----------------------------|
| Line 1: Ending Balance from previous report | 14530.64 |
| Line 2: Total receipts this period (page 3, line 11) | 1465 |
| Line 3: Subtotal (line 1 plus line 2) | 15995.64 |
| Line 4: Total expenditures this period (page 5, line 14) | 15995.64 |
| Line 5: Ending Balance (line 3 minus line 4) | -0- |
| 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: 4/29/14

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: R. R. G. H. (Candidate's signature) Date: 4-29-14

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) |
|--|---|--------|---|
| 3/16/14 | Nelson Bolen 30 Louise Road Belmont, MA | 100 | |
| 3/15/14 | Pamela Barry Galgay 62 Vernon Road Belmont, MA | 100 | |
| 3/25/14 | Gail Gorman 96 School Street Belmont, MA | 100 | |
| 3/23/14 | Julia Kirrane 23 Lawndale Street Belmont, MA | 100 | |
| 3/23/14 | Mayhew Seavey 541 School Street Belmont, MA | 250 | Engineer PLM Electric Power Engineering 35 Main Street, Hopkinton, MA |
| 3/23/14 | Susan Smith 44 Pequossette Road Belmont, MA | 200 | not employed |
| 3/17/14 | John Weis 30 Chenery Terrace Belmont, MA | 100 | |
| 3/29/14 | James Williams 7 Glenn Road Belmont, MA | 100 | |
| | | | |
| | | | |
| | | | |
| | | | |
| Line 9: Total Receipts over \$50 (or listed above) | | 1050 | |
| Line 10: Total Receipts \$50 and under* (not listed above) | | 415 | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | 1465 | ← 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 |
|--|--|---|---|---------|
| 4/7/14 | Helen Bakeman | 92 Lexington Belmont, MA 02478 | Reimbursement--refreshments for campaign event | 151.89 |
| 4/7/14 | John Bowe | 20 Elizabeth Road Belmont, MA 02478 | Reimbursement-cartridge for printer for campaign data printouts | 79.68 |
| 3/21/14 | Carly Brownsberger | 120 Gilbert Road Belmont, MA 02478 | Reimbursement--labels and flyers for campaign events | 67.99 |
| 3/20/14 | Cambridge Offset Printing | 56 Creighton Street Cambridge, MA 02140 | Mailer and postage | 3605.05 |
| 3/20/14 | Cambridge Offset Printing | 56 Creighton Street Cambridge, MA 02140 | Palm Cards | 516.42 |
| 3/27/14 | Cambridge Offset Printing | 56 Creighton Street Cambridge, MA 02140 | Letter, Attachment and Mailing | 6385.09 |
| 4/7/14 | Joe Fitzgerald | 61 Chester Road Belmont, MA 02478 | Graphic Design for campaign ads | 117 |
| 3/21/14 | Gatehouse Media | 15 Pacella Park Drive Randolph, MA 02368 | Newspaper Ad for campaign | 1689.66 |
| 4/7/14 | Anne Lazenby | 11 Oak Street Belmont, MA 02478 | Campaign work | 790 |
| 4/7/14 | Wayne Mesard | 14 Ash Street Belmont, MA 02478 | Reimbursement--Campaign office supplies | 69.26 |
| 4/7/14 | Mystic Scenic Studios | 293 Lenox Street Norwood, MA 02062 | Campaign Banners | 637.50 |
| 3/21/14 | Michael Smith | 40 Warwick Road Belmont, MA 02478 | Reimbursement-materials for campaign signs | 435.20 |
| Line 12: Total Expenditures over \$50 (or listed above) | | | | |
| Line 13: Total Expenditures \$50 and under* (not listed above) | | | | |
| Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD | | | | |

* 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:

Helen Bakeman

Committee Name:

Committee to Elect Roger Colton CPF ID #:

Amount of Reimbursement:

151.88

Date of Reimbursement:

4/7/14

ITEMIZE EXPENDITURES IN EXCESS OF \$50

| Date Paid | Vendor Name and Address | Purpose of Expenditure | Amount | |
|--|-------------------------|------------------------|--------|----|
| 3/31/14 | MAGNOLIA Wine Company | campaign event | 151 | 88 |
| | 130 Belmont Street | | | |
| | WATERSTOWN, MA 02472 | | | |
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| | | | | |
| Expenditures in excess of \$50 (listed above) | | | 151 | 88 |
| Expenditures \$50 and under (not listed above) | | | | |
| TOTAL AMOUNT REIMBURSED | | | 151 | 88 |

Signed under the penalties of perjury:

Helen Bakeman
Signature of Candidate/Treasurer

4/23/14
Date

Please use a separate sheet for each reimbursement check issued.

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Name of Individual Being Reimbursed: John BoweCommittee Name: Committee to Elect Roger Colton CPF ID #: _____Amount of Reimbursement: \$79.68Date of Reimbursement: 4/7/14

ITEMIZE EXPENDITURES IN EXCESS OF \$50

| Date Paid | Vendor Name and Address | Purpose of Expenditure | Amount | |
|--|-------------------------|------------------------|--------|----|
| 3/12/14 | STAPLES | CAMPAIGN REPORTS | 79 | 68 |
| | 111 Middlesex turnpike | - print CARTRIDGE | | |
| | Burlington, MA 01803 | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Expenditures in excess of \$50 (listed above) | | | 79 | 68 |
| Expenditures \$50 and under (not listed above) | | | | |
| TOTAL AMOUNT REIMBURSED | | | 79 | 68 |

Signed under the penalties of perjury:

Blaine Simpson
Signature of Candidate/Treasurer

4/29/14
Date

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Name of Individual Being Reimbursed: CARLY Brownsberger

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

Amount of Reimbursement: \$67.99

Date of Reimbursement: 3/21/14

ITEMIZE EXPENDITURES IN EXCESS OF \$50

| Date Paid | Vendor Name and Address | Purpose of Expenditure | Amount | |
|--|---|------------------------|-----------|-----------|
| 2/7/14 | STAPLES 186 Atwille Brook Parkway CAMBRIDGE, MA | flyers and labels | 67 | 99 |
| | | | | |
| | | | | |
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| | | | | |
| | | | | |
| Expenditures in excess of \$50 (listed above) | | | 67 | 99 |
| Expenditures \$50 and under (not listed above) | | | | |
| TOTAL AMOUNT REIMBURSED | | | 67 | 99 |

Signed under the penalties of perjury:

Blair Lejz
Signature of Candidate/Treasurer

4/23/14
Date

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Name of Individual Being Reimbursed: Wayne Mesard

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

Amount of Reimbursement: \$14.92

Date of Reimbursement: 4/7/14

ITEMIZE EXPENDITURES IN EXCESS OF \$50

| Date Paid | Vendor Name and Address | Purpose of Expenditure | Amount | |
|--|-------------------------|------------------------|---------------|----|
| 4/1/14 | STARBUCKS | coffee for volunteers | 14 | 92 |
| | 47 LEONARD ST. | | | |
| | BELMONT, MA 02478 | | | |
| | | | | |
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| | | | | |
| | | | | |
| Expenditures in excess of \$50 (listed above) | | | 14 | |
| Expenditures \$50 and under (not listed above) | | | 14 | 92 |
| TOTAL AMOUNT REIMBURSED | | | 14 | 92 |

Signed under the penalties of perjury:

Gloria Langley
Signature of Candidate/Treasurer

4/29/14
Date

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Name of Individual Being Reimbursed: Wayne Mesaro

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

Amount of Reimbursement: \$69.26

Date of Reimbursement: 4/7/14

ITEMIZE EXPENDITURES IN EXCESS OF \$50

| Date Paid | Vendor Name and Address | Purpose of Expenditure | Amount | |
|--|-------------------------|------------------------|-----------|-----------|
| 3/14/14 | STAPLES | office supplies for | 69 | 26 |
| | 186 A/E Side Brook Pkwy | campaign | | |
| | CAMBRIDGE, MA 02139 | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Expenditures in excess of \$50 (listed above) | | | 69 | 26 |
| Expenditures \$50 and under (not listed above) | | | | |
| TOTAL AMOUNT REIMBURSED | | | 69 | 26 |

Signed under the penalties of perjury:

Blaine Lejz 4/29/14
Signature of Candidate/Treasurer Date

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Name of Individual Being Reimbursed: Michael SmithCommittee Name: Committee to Elect Roger Colton CPF ID #: _____Amount of Reimbursement: \$435.20Date of Reimbursement: 3/21/14

ITEMIZE EXPENDITURES IN EXCESS OF \$50

| Date Paid | Vendor Name and Address | Purpose of Expenditure | Amount | |
|--|---------------------------|------------------------|--------|----|
| 3/11/14 | Anderson + McQuaid | materials for signs | 367 | 20 |
| | 170 Fawcett St | | | |
| | CAMBRIDGE, MA 02138 | | | |
| 3/14/14 | Arlington Coal and Lumber | materials for sign | 68 | 00 |
| | 41 Park Avenue | | | |
| | Arlington, MA 02476 | | | |
| Expenditures in excess of \$50 (listed above) | | | 435 | 20 |
| Expenditures \$50 and under (not listed above) | | | | |
| TOTAL AMOUNT REIMBURSED | | | 435 | 20 |

Signed under the penalties of perjury:

Glenn Lempier
Signature of Candidate/Treasurer

4/29/14
Date

Please use a separate sheet for each reimbursement check issued.



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Name of Individual Being Reimbursed: Rachel Sorenson

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

Amount of Reimbursement: \$899.77

Date of Reimbursement: 4/7/14

ITEMIZE EXPENDITURES IN EXCESS OF \$50

| Date Paid | Vendor Name and Address | Purpose of Expenditure | Amount | |
|--|-------------------------|------------------------|------------|-----------|
| 3/14/14 | Facebook, INC | Campaign ads | 51 | 79 |
| | 1601 Willow Rd | | | |
| | Menlo Park, CA 94025 | | | |
| 3/23/14 | Facebook, INC | Campaign ads | 251 | 83 |
| | 1601 Willow Rd | | | |
| | Menlo Park, CA | | | |
| 3/31/14 | Facebook, INC | Campaign ads | 500 | 96 |
| | 1601 Willow Rd | | | |
| | Menlo Park, CA | | | |
| Expenditures in excess of \$50 (listed above) | | | 804 | 58 |
| Expenditures \$50 and under (not listed above) | | | 95 | 19 |
| TOTAL AMOUNT REIMBURSED | | | 899 | 77 |

Signed under the penalties of perjury:

Glenn Lempert
Signature of Candidate/Treasurer

4/29/14
Date

Please use a separate sheet for each reimbursement check issued.